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ORIGINAL COMMUNICATIONS.

THE TONGUE IN DISEASE—DIAGNOSTIC AND CLINICAL NOTES.

BY LEMON T. BEAM, M. D., JOHNSTOWN, PA.,

Before the Central Medical Association of Pennsylvania, at Johnstown, November 18th, 1885.

From an extended observation I have been led to consider the *tongue* as a very important organ. To the physician, especially is it of great value when considered from a diagnostic stand-point. I would premise by remarking that the living normal system (*vis conservatrix naturæ*) acts on food and drink, on everything useful in the organism, to appropriate it to the formation of its tissues, and to throw off the waste matters by the process of elimination. This is the office of the digestive assimilation, and excretory organs. These conditions and processes are strictly *physiological.* Another set of processes and conditions are essentially *Pathological,* to-wit: Where the living system in a state of disorder (disease—*vis medicatrix naturæ*), acts on agents administered as medicinee; on poison generated within or introduced from without; on "malaria"; on "miasma"; on "viruses"; on effete matters—in short, on everything of a hurtful nature, to resist them, to expel them, to purify itself of their presence through the outlets best adapted to the purpose, and to repair damages. In either of the processes mentioned, the *vital forces* of the system must do the work. In both conditions the forces must be properly directed, otherwise they may fail to perform their legitimate functions.

Furthermore, in the treatment of disease we must take into serious consideration the cause and nature. Curative indications can have no other rational basis than a thorough knowledge of

pathological conditions—of the seat and nature of the disease. All rational treatment must rest upon a correct diagnosis. How can we treat a disease we don't know? Diagnosis is, therefore, the basis of the therapeutic art. False experience springs from false diagnosis, and it is this that has greatly hindered the progress of the healing art. We should use all the means at our command—call to our aid all the helps to a correct diagnosis.

The longer I practice medicine the more thoroughly do I become convinced that but few physicians really look to advantage, when, in obedience to their demand, a patient puts out the tongue. Much may be learned from accurate observation of the tongue; how much cannot be told in the brief time I shall devote to this paper; yet. I will endeavor to note some features which have been to me specially valuable, as diagnostic points, in various phases of disease.

The first point that I would make is, that in order to study the tongue, a thorough inspection must be made. Fix your mind as well as your eyes on the organ in its entirety. It is in this way only that the usual habit--"let me see your tongue," without seeing it—is broken up, and that one gets anything like an intelligent view of the organ. We must have the patient put out the tongue fully, so that the papilla at its base can be clearly seen; it will not answer to study the tip alone. In very young children it will require care and perhaps some stratagem, such as the placing of a drop of fluid, especially if viscid as syrup, upon the chin; a tickling sensation is produced, and the infant tries to remove the cause of irritation with its tongue. The condition of the tongue may thus be studied without much disturbance to the child.

The *manner of protrusion* is instructive. In the typhoid condition of fevers, and in some cerebral affections, the request to put out the tongue has to be repeated, and loudly, before the patient does as is requested; and similar reiteration is requisite to induce its withdrawal. A curious fact may be noted in this connection, viz.: that patients will frequently protrude the tongue when they cannot be made to do aught else, owing to the state of their mental faculties. The tongue manifests important signs at a very early stage in most cases of paralysis and mental disorder. In general paralysis the motor symptoms are first noticed in the tongue. When the patient speaks earnestly, articulation is imperfect and there is a certain pause or indecision detectable

in his utterance, as if there was some difficulty in bringing out the word. When the tongue is protruded, it will be noticed that it is done with some difficulty and that there is a fibrillar quivering or trembling of its muscles, but that it is not pulled to one side as in hemiplegia. In view of the delicate and complex movements which it has to execute with so much precision, and especially in the articulation of words abounding in consonants, where the most complex co-ordination is required, it is not surprising that its motor power fails in the earlier stages of paralytic affections. This *tremulousness* of the tongue, and which is of fatal omen, may not be apparent at first sight, when the patient is calm and collected; but if he has had a sleepless night, or if he is much excited from any cause, then it becomes evident. Look further when you see a pale and tremulous tongue. Where it occurs in an otherwise healthy person, after an alcoholic debauch, it may not be counted as a grave symptom, as this phenomena may be of short duration.

Persistent *tremulousness* of the tongue, however, indicates *alcoholism*, and less frequently lead or mercurial poisoning. It also denotes muscular weakness, which condition may be temporary. When seen in the early stages of typhoid fever, it indicates a grave condition of bad prognostic omen. In advanced stages the tongue is protruded slowly and with difficulty, indicating impaired power over the muscles.

In *delirium tremens*, while the tongue is usually covered with a yellowish fur, it may be clean, red, and glassy on the one hand, or brown, dry, and cracked on the other, yet it always trembles and is protruded, on the request of the physician, with an almost choreic jerk.

We find *paralysis* of the tongue not an infrequent complication of the most varied central diseases, but it is extremely rare as a peripheral affection. When the latter, we find it due to the pressure of a tumor growing from the medulla, in which event the paralysis of the tongue may be bilateral; to a gunshot wound of the neck, or injury of the hypoglossal nerve during various operations in this region. The unilateral paralysis of the tongue, "the organ when protruded from the mouth, is deflected toward the paralyzed side on account of unopposed action of the normal genio-glossus muscle. * * * After the paralysis has lasted for a certain length of time, the affected half of the tongue is found to be smaller than the opposite side, and the mucous

membrane covering it looks wrinkled. * * * When the paralysis is bilateral, the tongue lies in the floor of the mouth and cannot be moved in any direction." (L. Putzel) "In *hemiplegia* the tongue when protruded turns its apex to the paralyzed side, from diminution of power in the genio-hyoglossus muscle of the affected side. In *bulbar*, otherwise *glosso-labial* paralysis, the capacity to protrude the tongue is impaired or lost. In *facial* paralysis, without hemiplegia, this loss of power to protrude the tongue tells that the mischief is *central*, and within the skull; and not peripheral, or Bell's palsy." (Fothergill). Some observers state that the tongue in facial paralysis deviates to one side when protruded in peripheral as in cerebral paralysis. But this statement is based on an error of observation. The angle of the mouth on the paralyzed side is nearer to the median line than on the sound side, and the tip of the tongue therefore approaches the former. This point is important, as the absence of deviation of the tongue is one the of differential signs between peripheral and cerebral facial paralysis. It is well, also, to remember that where both sides of the tongue are paralyzed, it is due to disease of the nucleus. "Disease of the hypoglossal nerve, outside or within the medulla, causes paralysis of the same half of the tongue; and disease of the motor tract above the nucleus, causes paralysis of the opposite half of the tongue. Disease of the *neucleus itself* almost always causes paralysis of both sides of the tongue, because degeneration affects both nuclei, and the two lie so near together that both suffer in acute lesions." (W. R. Gowers.) Again we should remember, that in one-sided palsy, the tongue, at rest, is in its normal position in the mouth, but that the base is higher on the paralyzed side, owing to lack of tone in the posterior fibres of hyoglossus; that within the mouth, movement is deficient towards the paralyzed side, but on protrusion the tongue deviates from the sound, and towards the paralyzed side, being pushed out and over by the unaffected genio-hyoglossus; that in bilateral palsy the tongue lies motionless within the mouth, and cannot be moved; that in disease of nerve or nucleus, the tongue usually *wastes*, and the mucous membrane lies in irregular folds over its surface; and, that, in the disease named by Ducheme, "labico-glosso-pharyngeal paralysis," the symptoms are, as it were, grouped about the tongue as a centre, as it is in the delicate movements of lingual articulation that the first

symptoms occur—a clumsiness in the pronunciation of the lingual consonants l, r, n, t, and s. The most delicate of all the movements is that involved in the pronunciation of r, and it is in this that the commencing defect is often most conspicuous, as by making the patient say "truly rural." Here, however interesting and important the problems may be, we cannot dwell longer. [TO BE CONTINUED.]

ACUTE PLEURISY.

BY. E CARMICHAEL ROTHROCK, M. D., TEXAS.

Inflammation of the pleura is frequently associated with disease of contiguous tissues; again there may be no such complications, but presenting an example of simple acute pleurisy. It generally commences with a chill, followed by febrile reaction proportioned to the extent of the disease. It is most frequent in males, and most common on the left side. Primary, from cold, moisture, as cold damp winds, wounds, blows, etc., or secondary, caused by pneumonia, phthisis, hepatitis, pericarditis, disease of kidneys, as Bright's disease, tumors of adjacent parts as liver, spleen; from matastasis, rheumatism, pyæmia, mercury, arsenic and other poisons, classified according to parts involved, as pulmonic, costal, diaphramatic, inter-lobular. Anatomical inflammation may be followed by serious effusion, exudation, albuminous or bloody, first congestion of vessels, roughness and dryness. Then an increased morbid secretion transparent or turbid yellow and purulent, slight in excess, again sufficient to fill one side of the chest cavit. False membrane is frequently formed and deposited partly from fluid and partly secreted by the pleura, at first highly vitalized, but later, when fully organized may bind down the lung; connective tissue-adhesions may form between the pulmonary and costal pleura, the cavity becoming obliterated. When the lung is bound down to the spine and absorption of fluid occurs, deformity may ensue, particularly in young persons; the side sinking in and curvature of the spine also may take place.

SYMPTOMS.—Pain, "stitch in the side," is often severe and is characteristic; dry, short cough; quick, hurried breathing; general febrile action; the pain may occur before, with, or after the chill; it is increased by respiration, movement and cough. Therefore effort to suppress respiration and cough is observed.

The cough in the early stages is absent, especially if the costal pleura is the seat of invasion; if the lung becomes involved there will be a dry, hacking cough accompanied with very little expectoration; effusion causes oppression by paralyzing the respiratory muscles and preventing expansion of the lung; pulse full, 100 to 120; temperature, 100 to 102°. Dyspnœa is present; the patient lies on the diseased side or back to relieve it, but if much pain, lies on the sound side.

PHYSICAL SIGNS.—Thorax enlarged from exudation; if left side is affected the heart and spleen is displaced; if the right side, the liver will be pushed down; vocal fremitus is destroyed on the affected side. Percussion over the effusion is dull, at first at base of the lung; if diaphragmatic pleurisy occur there may be no dullness, but pain in region of the diaphragm, increased upon cough, movement and pressure; frequently hiccough, nausea and vomiting from pressure on branches of the pneumogastric nerve, inter-lobular form, there may be no signs of pleurisy, but general symptoms of abscess of lung, generally at base of lung; effusion may be evacuated through bronchus.

AUSCULTATION.—The respiratory murmur in parts invaded is decreased, bronchial breathing will be increased over root of lung, and œgophony; if small quantity of liquid, puerile respiration in the sound side from increased action; frequently rales are heard caused by hyper-secretion; increase of fever until effusion takes place, then it declines, friction sounds are again noticed as the effusion disappears, the pleural surface having been roughened.

COMPLICATIONS.—Pneumonia, pericarditis, pluero-dynia.

DIAGNOSIS.—By the physical signs, pain, "stitch in the side," cough without expectoration, dullness on percussion, fever, decrease of respiratory murmur and fremitus diminished, loss of sound over parts of greater dullness often follows pneumonia.

FRICTION—SOUND.—In pneumonia we have the fine crepitant sound; higher fever; rusty sputa; dullness; increased vocal fremitus; pain dull; localized; respiration feeble and bronchial sounds in parts of greater dullness.

PROGNOSIS AND DURATION.—From one to two weeks. Uncomplicated pleurisy will nearly always recover, but may be protracted when due to poison in the blood, as mercury, copper, arsenic, antimony, etc., and generally have a fatal tendency.

TREATMENT.—The indications are to relieve pain, prevent

the tendency to effusion, when found to promote absorption. To reduce the pulse and fever, we give one to two drops aconite and the same dose of ipecac tr. every hour until fever begins to decline, then at longer intervals, say every two hours. If the fever is high and pulse full, hard, corded, we give verat. vir., or alternate with the aconite and ipecac, verat. vir., in doses of 1 to 2 gtts., alternated every hour or half hour as indicated. To relieve oppression and pain, a hot mush poultice with or without turpentine is the best application for pain and to relieve congestion by inviting the blood to the surface, relieving the lung of that much fluid. If the pain in the chest is very severe, then dry cups or a large mustard plaster could be used, then the turpentine mush poultice applied. If the tongue is coated white, I find bryonia alba, 2 to 5 drops, sanguinaria tr., 2 drops, every two hours to meet this; if the coat is of a yellow color, then leptandra, i gr., with the sanguinaria will act well. If invasion of the lung has taken place, there is nothing like some preparation of blood-root administered in tincture or syrup, etc. Diuretics may be useful in the first stage or later on to relieve loaded vessels; jalap and bi-tartrate potassium, or small doses of sul. mag., thereby relieving the overcharged organs and promoting the absorbent power of the blood vessels. Potassium acet. is also useful and acts well when indicated. Diaphoretics, as asclepias tub., in doses of 15 to 20 gtts. tinct., every hour or two, or jaborandi in 8 or 10 gtts. doses, or alternate the two, is effectual, both having an affinity for the skin and mucous membranes. If the skin is dry, harsh and hot, there is nothing that will excell the asclepias. I have used it for years, and in this condition of the skin, and also when connected with pulmonary diseases, asclepias is prompt and certain in its action; in combination with jarboranda it will relieve irritation, allay cough; if sanguinaria is added it will not only have this effect, but it will act on the portal circulation, stimulate the liver, produce sedation and tend to limit effusion and promote absorption. If the disease increases, and takes on chronicity, then iodide potassium alternated with the above, is the treatment, and iodine ointment externally; if effusion increases and cannot be evacuated, then aspirate and repeat as often as need be; diet must be nutritious; tonics if called for; plenty of pure air and exercise when possible.

PUERPERAL SEPTISEMIA.

BY J. N. D. C. CLOUD, M.D., NEWNANSVILLE, FLA.

We are having a huge time with the women giving birth to their young; of course, I have reference to the serious part of this affair. Some few weeks since I was summoned to Mrs. C., in consultation with my brother She was about twenty-two summers, rather stout build; it was her first confinement and as a natural supposition, all were very anxious about her situation. Her labor was a very tedious and protracted one. The physician attending became somewhat alarmed, but before I arrived she had been delivered of a very fine, well developed boy, but considerably exhausted. I advised a small quantity of spirits frumenti, which, of course, had the desired effect, and she did remarkably well under the existing circumstances. In four or five days afterwards I was sent for, but being out of town, did not get the message until the day following. She was attacked with a rigor; fever became very high; pulse ran up to one hundred and twenty; temperature, 104°; bowels constipated; tympanitis prominent; urine passed very frequently, but in very small quantities. After examining the urine, found about 20 per cent. albumen, specific gravity 10 to 30. She complained of dimness of vision, nausea, vomiting and considerable headache, low blood pressure. On my next visit I made a very scrutinizing investigation to elucidate the cause and nature of the associated trouble. I concluded that my patient was then suffering from uremic poison; while I was weighing the complication, one of those paryoxisms came on, which, of course, created quite an excitement. I was aware that I had to combat against two maladies instesd of one; the uremic convulsions was a secondary consideration. Now, the question is, what produces the uremic convulsions? Is it from non-elimination of urea, i. e., uremia? A few scientific writers are of the opinion that it is not urea which vititates the nervous centers, but modified the assertion, and think carbonate of ammonia the product of the decomposition of the blood. In opposition to this chemical hypothesis Traube advances a physical one. He contends that the convulsions a recertainly due to cerebral anæmia; also claims that if from any cause the serum becomes liquified, or tension of the arteries increased, œdema and anæmia of the brain follow with symptoms identical with those of uremia in Bright's

disease. We are aware that albumen is due from renal congestion; for instance, in Bright's disease we do not stimulate the kidneys at all, but *vice versa*, we give such remedies that will act directly upon the uriniferous tubules, such as tannic acid; but in treating uremic convulsions we do not consider the albumen the dangerous omen, but the idea is to convert the uric acid into one that is harmless to the system.

Perhaps my opinion is incorrect, but at any rate I will express myself fully in regard to the case. The uremic convulsions are brought on or caused from vaso-motor paralysis; consequently cerebral anæmia.

TREATMENT.—Control convulsions with verat. vir. and sulph. morphia, hypodermically. I now speak of puerperal, but in uremic, I give benzoic acid, which converts it into hypuric, which is perfectly uninjurious; I also use injections of hot water with carbolic acid. I think there is no better antiseptic than turpentine stupes. Unload the bowels with injections of warm water and chloride of soda. Then I give hyd. chlo. mit., grs. v; pul. opii., grs. iij. Fiat. No. 5. One every three hours. Sulp. quinine, ʒ j; salycilic acid, ʒ j. M. Divide into 12 powders; every four hours give one. I think the best diuretic is buchu infusion.

Hoping to hear from my classmates, I had better close. For instance, J. Frank Harris, Couch, Hillman and Durham. Come, Sam, let me hear from you and the rest of the boys. Come out and give us some of your sad experience. Hoping to see you all at the next National Convention, I will bid you adieu.

WATER AND ICE IN CONGESTIVE CHILLS.

BY J. R. BARNETT, M D., WARREN, ARK.

I have just read an article on the treatment with ice of congestive chills, by Dr. L. B. Anderson, which I indorse, and now will give you my experience with ice and cold water in the treatment of congestive fever, for which I claim a priority.

About fifteen years ago I was called to see Mr. B——, who was a very intimate friend of mine, and one that I loved and respected like a brother. I found him laboring under a very severe form of malarial fever (so common to this county). I prescribed for him the usual remedies, and left. In four or five days I was called in again. Found him with general congestion,

with system very much depressed; pulse from 40 to 60; surface cold and clammy, except thorax and abdomen; vomiting almost incessantly; very restless—so much so as not to sleep any at all in four days and nights; lower extremities cold and clammy to the crotch; the upper the same, to armpits, face studded with drops of cold and clammy perspiration; his hands presenting the gooseneck appearance, dysnpœa, etc. I, with the advice and consent of two other physicians, used the usual remedies to allay vomiting, and to arm him up, mustard, capsicum blistering, hot water, bricks, corn, and hot bath, with no perceptible effect. To make a profound impression, we gave him herculean doses of calomel in capsules. After retaining them for eight hours would throw them up undissolved, with contents of stomach as blue as indigo.

After pursuing this treatment for several days, on the eighth or ninth day we gave him up to die. Mr. B—— being rational, I said to him that we had done all we could for him. He said he did not want to die, but was not afraid to die (being a very pious man). There was only one thing I could think of that I never had tried; never saw it or heard of it being tried; that was cold water. He said, "I am in your hands; do as you please with me." Accordingly, about noon—a very hot day in August—(the other M. Ds. disagreeing with me had left, expecting him to die under the water, to rid their skirts), I placed him on a cotton mattress on the floor, folded a sheet several times, put it around his body; put every one, except his wife, out of the room, as it was crowded with friends to see him die. I then poured water on him for seven hours without the least intermission. He only vomited once, and, strange to say, it was black coffee grounds, as much so as the black vomit in yellow fever, whereas one hour before it was as blue as indigo. I then thought the last hope gone; but persevered until he went to sleep under the water, the first sleep he had had in four days and nights. At the end of the seventh hour I placed him in bed between two blankets, which brought about a free perspiration over the surface generally—the first warm sweat perceptible for eight days. By next morning he was convalescent. Gave him some bland fluids to drink, and mild laxatives for a day or two, with a few doses of quinine and calomel alternately with hypodermic injections of morphia.

The water, in the language of Dr. A, broke up the congestion,

restored the circulation to the surface, and general relief to the patient.

Two years thereafter the same man had a similar attack, excepting pulse running up from 80 to 100. I commenced in time with water, using it a dozen times or more, not more than one to two hours at any one time, whenever he would complain of dyspnœa produced by thoracic congestion. As I did not have the time, I depended on the nurse to apply the water, which he succeeded in doing, giving relief in every trial. This case gave me great notoriety throughout this and adjoining counties.

Since that time, I have treated five hundred cases, or more, without the loss of a single case. I regard water as much a specific for congestive fever as quinine for intermittent fever.

This treatment is being generally used by all physicians in the country, with fine success. I have offered five hundred dollars for any one to name a case I have lost. The luck may soon change. I can't tell; but such are honest facts; and I do hope you will glean and revise this article, put it in shape, and publish it for the very great benefit of suffering humanity. I see, from reading, that a great many die every summer from congestion, when there is no excuse for it.

I have given you this case in detail so as to convince you of the efficacy of water and ice in congestion.

I neglected to state, at that time we had no ice; since then we have a railroad, and can get ice. I now, as Dr. A. does, give cracked ice to be swallowed *ad libitum*. I also neglected to state that, at the same time I pour the cold water I put the patient's feet in a hot mustard alkaline bath, and continue the cold water until the patient complains of feeling chilly; and if reaction is not fully established I repeat the same in from two to four hours.

My eyesight is bad, and very nervous; therefore you will excuse orthography and King's English.

THE "REGULARS" IN TEXAS.

BY J. E. A. BALL, M. D., DAVIS, TEXAS.

"*Regular*" *Quackery* in Texas is so commonplace that Dr. Alexander W. Achison, of Denison, is neither surprised nor disconcerted when his attention is called to it. Why should he be? Natural instincts never leave the beaten path of centuries of travel. Let us see; here is a fair specimen:

No. 1. A "Regular" surgeon recently wrung off the neck of the femur while forcibly and violently manipulating a limb to reduce a supposed dislocation of the hip, though three intelligent physicians had already diagnosed the case *morbus koxarius*, and were treating it as such for several weeks!

No. 2. A "Regular" M. D. prides himself as a great obstetrician. This "Regular" recently sent for counsel to help him remove a second baby, after one had been born a few hours previous. The woman insisted that it was an adherent placenta that confronted the doctor—that and nothing more! True: the fact soon proved the "Regular" was in stupendous error!

No. 3. A very pompous and arrogant "Regular," while recently in consultation, responded to the suggestion of using an atomizer by the consultant, as follows: "A good idea, doctor; rub it all over his throat and lungs!" This "Regular" is in as good standing as are the others.

I might mention many more of this kind, for you can't go amiss of them; but prefer not to burthen your pages with records of this kind, which are bad enough at best.

Now, you will note that the "Regulars" are calling for all sorts of unclean birds to assemble on the Allopathic roost. The ignoble meanness of attempting to class Eclectics and Homœopaths with the basest kind of Quacks and Mountebanks, go to show that the "Regulars" are not afraid of the Quacks, but dread most fearfully the noble, honest, manly competition of upright, liberal physicians, that have proven such formidable antagonists to the "Regular" medical profession, which has never been able to sustain itself in a clear and open field.

This kind of bushwhacking will most assuredly show up the weakness of the "Regular" cause, and turn the fight against them once more. Dr. Achison has heard from forty-one counties! What has he to show? Nothing but the acts of a few ignorant people, who he is endeavoring to make the legislature believe are representatives of the honorable competitors of his school of physicians! This is the exquisite essence of abject fear. Quackery is in every country; even throughout Europe, where the medical laws are of the most stringent kind. Read this:

"*Quackery Increasing in Illinois.*—It is said that so far as the notorious advertising quacks of Chicago are concerned the medical practice act of Illinois is a dead letter, there being now a larger number of 'lock hospitals,' 'infirmaries,' 'vacuum,' and

'electrical' institutions for the treatment of young and middle-aged men than ever before.—*Indiana Med. Journal.*

But what high-minded and honorable men would, for one moment, stoop to the meanness of attempting to class Eclectics and Homœopaths with this charlatan class?

"Don't bother with a formal report, but jot down a few Texas facts and send them up!" The liberal profession will see Dr. Achison through the legislature of Texas, and give him and his coadjutors a burial certificate and a burial box. Ah! these melancholy "Regulars," how stupidly bad they are!

CASE-BOOK.

BY C. D. R. KIRK, M. D., FERN SPRINGS, MISS.

We should not stop at facts in practice, but extend our articles to the more interesting part of the profession—financial part; at least, we should know our patrons and our business, and as collecting is indispensible, have it well in hand. The country or village doctor must turn to another calling occasionally to facilitate his collections. A good collector is, generally, a safe physician. He don't practice much "bosh," and, as he expects to do his duty in collecting, he will not want any such objections to his bills as, "You didn't come when I sent for you;" "You were too slow to give relief, and save my child;" and "I would just as soon have no doctor anyway as to send for him one day and have him come poking up next day." And, as I have intimated in former articles in this journal, do your whole duty as physician to the sick; make your charges reasonable and correct, present them in due time and in a business way, so as to let the people know that the practice is a business and must be so considered. I generally class my patrons as paymasters; from some I only expect work or trade, whilst others are counted as cash. I generally sort out a parcel who can only pay their bills in cattle, and others who can only pay by driving cattle, and by combining the two a car load or two of beef cattle are collected and shipped to New Orleans, where the cash is at hand—a sum ranging from two to four hundred dollars—which is by no means a dishonor. The poor man has paid for his practice, the doctor is benefitted, and that without omitting practice for a single day, unless he wants to rest by traveling, and makes the trip with his cattle. We need not expect cash from every man, but very

nearly every man can pay his bills in some way or another, if the doctor will arrange his patrons and his business so as to utilize the products of the country, without waiting for it to be handled by the "middle man." But this thing of collecting often requires good thought, and as methodically arranged, as does any part of the doctor's practice, and, without due attention, will soon prepare the M. D. to move his location. Here, in Mississippi, the law exempts more than a majority have; besides, the "fellow" can bargain and sell to his wife or other parties, so as to prevent the collection of debts by execution. This is all very good. perhaps; but the doctor must expect to collect without any assistance from the law, and, therefore, good brain work is as necessary to collect as to practice successfully.

TINCTURE OF NUX IN COLIC OF INFANTS.—THE NATIONAL.

BY J. A. WATKINS, M. D., WARREN, ARK.

I have used tincture of nux vomica in the case of colic in infants with the happiest results. The dose is small—only a fraction of a drop. I usually place a drop in a goblet; to this I add 8 teaspoonfuls of water; order a teaspoonful to be given every two or four hours, according to the age of the child or the severity of the symptoms. It is interesting to note how these small doses bring relief to children that are racked with colic pains. In some cases a longer time elapses before relief comes; yet it is sure nearly to be obtained.

Now that I have my pen in hand, I will take the opportunity to say to my Eclectic brethren of the South that we of Arkansas will turn out in full force to the National next June. The South feels this is the golden opportunity to do their whole duty, that the great cause of liberal medicine in the South may advance with rapid strides. We predict the next National will be a magnificent success, while our enemies are hoping that it will be a dismal failure. It can't fail.

TO ALL ECLECTIC PHYSICIANS IN THE STATE OF TEXAS:

The undersigned, having been elected corresponding secretaries of the Texas Eclectic Medical Association, desire to open correspondence with each and every Eclectic Physician in our respective districts, viz: J. E. A. Ball, Davis, Lamar County,

for all that portion of the State lying North and East of the Brazos River; and M. W. Henry, Waelder, Gonzales County, for all that portion of the State lying South and West of said river.

Eclectic Physicians occupying our respective districts will please forward to us (as above) their names and addresses in full, as we wish to send them copies of the Proceedings of the Association. Besides this, there are other matters of vast importance to the profession which should bring us into direct communication with each other.

All Medical journals having a circulation in the State of Texas will please copy, and oblige,

Yours fraternally,

J. E. A. BALL, M. D.,
Cor. Secretary Texas E. M. A., Davis, Tex.
M. W. HENRY, M. D.,
Cor. Secretary Texas E. M. A., Waelder, Tex.

ABSTRACTS.

BISULPHATE OF QUININE FOR HYPODERMIC USE is preferred by Eclectics in lower Georgia to the ordinary sulphate, because it is more soluble. Professor Hands says, Glycerine and water, equal parts, with the aid of a little heat, will dissolve the bisulphate. One drachm of the bisulphate will dissolve in two drachms of this menstruum, if aided by heat. From 15 to 20 minims are used with the hypodermic syringe in cases of pernicious intermittents and remittents, and neuralgia. The sulphate of quinine is much stronger than the bisulphate; hence 5 grains of the former are equal to from 7 to 10 grains of the latter, and larger doses of it are required to produce the same effect. Hydrobromic acid is a good solvent of sulphate of quinine for hypodermic use, because it is less irritable to the tissues than sulphuric acid. The usual menstruum is a solution of hydrobromic acid, ʒ ij; water, ʒ iv. This quantity will dissolve Quinine, sulphate, ʒ ij, aided by gentle heat. Each fluidrachm contains 7½ grains of quinine, sulphate.

We learn from Dr. Bfirnett, of Mississippi, that the best results are had from hypodermic injections of tincture of gelsemium, given during or just before a chill in these pernicious intermittents,

accompanied by the hypodermic injection of quinine. The effect is everything that can be desired. Dr. Barnett says that when the fever is high, and there is delirium, the hypodermic injection of gelsemium is exactly the needed remedy. It lowers heavy arterial tension without impairing the force of systole. The pulse becomes soft, the skin moist, and high nervous excitement subsides. In this stage of the disease quinine is not advisable.

SUMMER DIARRHŒA OF INFANTS are mostly catarrhal in nature, which is too often brought on by improper food or badly managed feeding. It is often seen in nursing infants who are also fed spoon food. This latter food we think is the cause of the intestinal catarrh. Several years ago we called attention to the salicylate of soda as a good remedy in these affections. Its action is no doubt due to its germicidal properties. We see the remedy frequently mentioned of late in this connection, in some of our exchanges. The dose is 2 to 5 grains of the salicylate of soda, every two hours, in some bland fluid.

INFUSION OF GRAPEVINE IN METASTASIS OF PAROTITIS is set forth in the Massachusetts Medical Journal as a remedy of great value by N. Gallup, M. D. The resulting orchites, he says, is promptly cured by applying woolen cloth wet with the warm infusion to the inflamed and painful parts. About fifteen or twenty feet of the grapevine twigs are cut up in inch-long pieces and infused in a quart of water. This local application, Dr. Gallup says, is sufficient when applied to the female mamma or over the ovaries, when these become affected, as a metastasis of mumps. He reports a number of cases successfully treated in this way.

ONION TEA IN COLIC OF INFANTS is claimed by F. Vernette, M. D. (in Physio-Medical Journal) to be a soothing remedy, and to give prompt relief. This is a valuable hint, and worth trying. Remember onion tea when you wish to sooth a squalling baby. Human life is too precious to be trifled away with opium *a la* "Regulars."

MELANCHOLIA.—I have sought for a remedy for years for this malady, and have at last found it in the triple valerianates, which work like a charm: ℞. Zinc valerianide, 20 grains; quinine valerianide, 20 grains; ferri valerianide, 20 grains. Mix. Ft. pill No. 20. Sig. One, three times a day. The drugs must be absolutely pure.—DR. S. A. DEFOE, in Medical Brief.

THE ACTION OF THE PUPILS IN HEALTH AND DISEASE.—Dr. Joseph Kurtz, in Southern California Practitioner: It is generally understood that the eyes are expressive of a man's character, though in many cases they may not tell the truth. But to the medical practitioner the appearance of the eyes of a patient is of great importance, and if it does reveal to him the true character of the subject to be examined, it should certainly assist him in the diagnosis of a case. I don't here refer to diseases of the eye, but merely to the influence of the nervous system on the action of the pupil.

The size of the pupil of a healthy eye depends on the quantity of light falling into it, on the exercise of the power of accommodation and also on the changable condition of the sympathetic nerve.

The stronger the light the smaller are the pupils and we find that the light influences both eyes even if only one be exposed to it, the other being occluded perfectly by a bandage. This is caused by a reflex action in the following manner: The stimulus of light on the retina of the right (R) eye traverses through the chiasma along both the optic nerves to the corpora quadrigemina, as the nerve-fibres do not entirely, but only half cross. From the corpora the stimulus is conducted to the nucleus of the 3rd or occulo-motor nerve, which must affect both its pupilar branches and in this way bring about an equal contraction of both pupils.

If we illuminate the R eye and its pupil does not contract, but that of the left eye (L) does contract, we can fairly conclude that the right optic nerve is not at fault, but that it conducts the stimulus of light in the usual way and also that the R eye sees. The lack of contraction of the pupil must then depend either on paralysis of the pupilar branch of the oculo-motor on the right side or else on disease of the iris or on the effect of mydriatic or medicines.

In case of disease of the optic nerve of the R eye the pupil of the L one does not respond to the stimulus on the first, but if we illuminate the L eye the pupil of the R one contracts, complete blindness in both eyes may exist and still the pupils respond to light, as in uræmic amaurosis; in such cases the cause of blindness is to be found in the nerve fibres beyond the corpora.

Now let us consider the influence of the exercise of the power

of accommodation on the pupils. Looking at a distance dilates, while look at a near distance contracts them, entirely independent of the influence of light, even if one or both optic nerves are diseased. In such cases the nucleus and both pupilar branches of the oculo-motor nerve must be intact. If the pupil of one eye does not respond to either light or accommodation, but that of the other does, and no disease of the iris present, there must be a paralysis of the pupilar branch of the first eye, in such a case this pupil is always dilated and immovable. According to Meric and Alexander such a paralysis is often caused by syphilis. If the pupils respond to the use of the power of accommodation, but not to light, there must be an abnormal condition of the fibres which connect the corpora with the oculo-motor; this may be noticed frequently in the various diseases of the brain.

Besides the power of accommodation and light I also mentioned the condition of the sympathetic nerve as one of the factors on which depend the size of the pupils. It has been clearly proven by experiments that irritation of the sympathetic causes a dilatation and cutting entirely through a contraction of the pupils. Claude Bernard has also shown that the pupils respond to all sensible irritations, and Schiff demonstrated that no more dilatation takes place after severing the medulla oblongata. From this we can infer that the fibres of the sympathetic are affected by the sensible irritations within the brain substance, and Vulpian states, after careful experiments, that the dilating fibres consist partly of sympathetic and partly of brain-nerve fibres, which run together to the eye. We can easily convince ourselves that every sensible irritation dilates at once the pupils of a sleeping child. Physical irritation acts similarly. The pupils of a cat dilate suddenly and ad maximum, if the animal gets angry. The very small pupil of a child, exposed to the ophtalmoscope, may suddenly dilate if frightened. During a sleep or in a narcosis, when sensible or physical influences are least present, the pupils are always less than medium dilated, in a coma they are even contracted. This unmistakable influence of the sensible and physical irritations on the size of the pupil entitles us to accept the words of Schiff: "The pupil is the finest æsthesiometer." Neuropathologists and particularly physicians in insane asylums are well acquainted with the fact that weak, nervous persons, so-called erethic individua, and also maniacs, have very often dilated pupils. Indeed, contracted pupils in an

excited maniac are looked upon as an ominous symptom of approaching paralysis. Contracted pupils, if not influenced by light or accommodation, are always characteristic of such conditions which cause a depression of the function of the cortical substance. Not rarely we find contracted pupils in diseases of the spinal medulla, particularlly if the seat of disease be in the cervical vertebræ, and also in morbid condition of the medulla oblongata.

Very remarkable is this myosis in tabes, in which the pupil is also perfectly immovable. The contraction in such cases is only due to the diseased medulla, and especially of the posterior columns, and therefore important in different diagnosis; atropia has very little if any effect in tabes patients. Riegel, of Wuerzburg, reports a case in which a knife was run into the neck, cutting through the left half of the medulla with the following result: "Right side of the body anæsthesia, left side hyperæsthesia, sight normal, pupils very contracted." Baerwinkle noticed the same condition of the pupils in the case of a gunshot wound through the neck, and so did Russel in a case of fracture of 7th cervical and first dorsal vertebræ. Precisely the same case as the last one I had under observation; Al. McD. fractured those vertebræ jumping into a shallow river headforemost, intending to take a bath. He had complete paralysis and anæsthesia of more than the lower half of the body, with strongly contracted pupils.

Cases have also been reported to prove that irritation of the sympathetic nerve dilates the pupils. Crenmack has perhaps first demonstrated this fact by pressure upon a tumor of the neck. I have repeatedly convinced myself by pressing upon such tumors in the neck, and also in the mediastinum; dilatation follows immediately.

Du Bois Reymond explains the dilatation in hemicrania by irritation of the sympathetic. In the same way we must explain the dilatation in lead-colic, in the passage of biliary or nephritic calculi through the duct or ureters. Children suffering with worms have usually dilated pupils, which contract to normal size after their expulsion. Many cases are also on record which prove that severing and paralizing the sympathetic causes instant contraction of the pupils; Poitsan alone reports nineteen such cases. Carbonic acid poisoning and dyspnoæ cause the pupils to dilate; I remember a case of a man who suffered

frightfully with dyspnea, apparently caused by a foreign body in the gullet with such a degree of mydriasis that hardly any iris was visible; after extracting almost a whole chicken-leg from his gullet, and a few respirations, the pupils were of normal size. We can easily cause a dilatation of our own pupils by suspending respiration for about half a minute. Every practitioner must have noticed the mydriasis in paroxysms of whooping-cough, in croup, or the act of vomiting, during labor; all of those conditions cause more or less dyspnoæ. This dependence of the size of the pupils on the respiration is of very practical importance in all narcotic conditions. As long as the pupils are cotracted in a case of opium-poisoning we may have a fair chance to save the patient, but should we find him with dilated pupils our prognosis must be bad. When during the chloroform-narcosis the pupils contract thoroughly, then we have obtained the highest degree of narcosis and the anæsthetic may be omitted. If during the operation, through the effect of sensible irritation, the pupils begin to dilate, we must expect that the patient rouses from the narcosis, and may renew the use of chloroform. Should, however, during uninterrupted chloroform-inhalation the pupils suddenly dilate, then we must consider this an unmistakabe sign of beginning carbonic acid-poisoning in consequence of imperfect respiration, which demands discontinuance of the chloroform and obliges us to resort to artificial respiration. Mydriasis may also be caused by increased pressure on the brain; this can be noticed in all cases of cerebral tumors with stasis-papilla, in hemorrhage within the cranium, even in strong hyperæmia of the brain, and also in hydrocephalus.

If we find any difference in the size of the two pupils, both being at rest and mobility being intact, there must be abnormal condition of the sympathetic nerve-fibres, either at its periphery or during its course through the brain or spinal medulla. It might be difficult in such cases to decide which is the diseased one since a parethic condition causes a contraction and an irritated condition of the pupil. But as the sympathetic not only influences the pupils, but also to some extent the lids, we will always find, if a condition of the pupil is caused by a paresis of the sympathetic, a corresponding contraction of the space between the lids, while an enlargement of this space with dilation of the pupils would indicate an irritated sympathetic. The effect of atropia in parisis is very little, in irritation very powerful.

One-sided paralysis of the oculo-motor nerve and accompanying mydriasis is not very rare and of no great consequence, but one-sided mydriasis of a *movable* pupil always caused by an irritation of the corresponding fibres of the sympathetic and is an ominous symptom of beginning brain disease, and if the pupils change about, being mostly dilated, we must give a very bad prognosis. Such differences in the size of the pupils is oftener noticed in men than women, and very rare in children. During sleep this difference disappears. It is often noticed in the insane, especially in dementia paralytica.

I believe I have shown enough of the influence of psychological, physiological and pathological conditions on the pupil that we may now better comprehend the common phrase, "The eye is the mirror of the soul."

THE USES OF CIMIFUGA RACEMOSA IN THE ECLECTIC SCHOOL.—(Prof. John King, in Drugs and Medicines of North America) The following is a concise statement of the therapeutic value of black-cohosh root, as determined in my own practice, and when its employment was not alternated or combined with other medicines. I have prescribed this agent since 1842, at which time, as far as I am aware, very few practitioners had any knowledge of it as a medicine. A saturated tincture has always been, and is still preferred, prepared with stronger alcohol; and next to this, the alcoholic extract.

These preparations, when administered internally, lessen the action of the heart and arteries, diminish nervous irritability, and remove abnormal conditions of muscular tissues, as well as of certain glandular organs, while at the same time a mild narcotic influence is experienced in numerous instances. In inflammatory rheumatism, when given in the first attack, the tincture has not only removed the disease, but has likewise appeared to so change the rheumatic tendency, that a second attack is seldom to be anticipated; to effect this the tincture should be administered in doses from 10 to 60 minims, repeated every two hours until the patient's head becomes affected, after which the intervals between the doses should be sufficiently increased so as to continue to keep up this action upon the brain for several days, or until the disease has completely disappeared. In chronic rheumatism it has proved useful, diminishing the severity of the pain, and lessening the duration of the disease, but nothing more unless in combination with other agents.

In conjunctivitis and in sclerotitis, in doses from 10 to 60 minims, repeated every hour or two, it has effected a complete recovery in a few days. It has also been attended with excellent results in relieving the more active symptoms attending the early syphilis, in which disease a further investigation of its action is highly desirable, as well as catarrhal affections of the respiratory organs.

In choera this is the principal agent upon which I have relied for the last fifty years, preferring, however, in this malady, the alcoholic extract. Without entering into particulars, it may be stated that this agent has been successfully employed in neuralgic affections, in uterine leucorrhœa attending endometritis, as well as conjestion of the uterus, also in those affections of the female reproductive organs in which the menstrual function becomes deranged, as manifested by amenorrhœa, menorrhagia, frigidity, sterility, etc.

It is an ecbolic, as several instances are known in which the tincture, having been taken every three hours by pregnant women, effected the desired abortion; it undoubtedly exerts a very positive influence upon the generative organs of women. As an accelerator of labor, in cases of uterine inertia, the tincture or the powdered root proves a substitute to ergot, in the majority of cases arousing the uterus to contractions more nearly resembling the normal ones, and without any risk to the fœtus, or impairment of uterine sensibility to its influence upon subsequent administration; though, with ergot and similar agents it occasionally fails in its action. Immediately subsequent to a protracted or severe labor, the tincture will allay any nervous excitement that may be present, will relieve severe afterpains, and will favor uterine involution. In subinvolution of the uterus, accompanied menorrhagia, the tincture or the extract will be found an efficient remedy.

When the tincture is exhibited in sufficient doses to keep up a slight effect upon the brain, it proves a very remarkable remedy in certain forms of malarial disease, also in neuralgia. Gastric acidity undoubtedly interferes with its remedial action in all instances. The root is said to contain tannin, but no decidedly astringent effect has been observed from its use.

Although a large dose is given herein, yet it must be remarked that some care and watchfulness is necessary in its administration, as I have met with several instances in which 2 or 3 drops of

the tincture, repeated every hour, after a few hours, occasioned symptoms closely resembling those of delirium tremens; indeed, in one case, the administration of but one drop was invariably followed by these symptoms, and its further employment had to be omitted. Black cohosh is one of the most peculiar agents met with in the vegetable kingdom; it appears to exert a remedial influence upon both the serous and mucous tissues of the system when in abnormal conditions, and consequently has proven a superior remedy in numerous chronic diseases.

The specific tincture of the root, as prepared by Messrs. Lloyd Brothers, appears to have nearly, if not quite, all the remedial influence of the saturated tincture, more especially in rheumatic and neuralgic affections, and in abnormal conditions of the principal organs of reproduction in the female. The fluid extract and the infusion of the root are less active in effecting the therapeutical influences just described; however they will be found more especially beneficial in small pox and other exanthema, both as a prophylactic and a remedy. It will simply be remarked here, that in alternation or combination with other medicines, not only is the usefulness of black cohosh increased but its field of operation is greatly enlarged.

The resin of cimicifuga, improperly called "cimicifugin," was first prepared by myself in 1835; then, having subsequently tested its therapeutical virtues for about ten years, I called the attention of practitioners to it; but it did not come into general use until about 1850. The resin does not appear to possess exactly the same properties as the tincture, its narcotic influences being less decided. Alone, I have found this resin very efficacious in maladies of the female reproductive organs, as in chronic ovaritis, endometritis; menstrual derangements, as amenorrhœa, dysmenorrhœa and menorrhagia, frigidity, sterility, threatened abortion, uterine subinvolution, and to relieve severe after-pains. In alternation or combination with other medicines it has exerted efficacious results not necessary to mention here. Other practitioners have related its employment in nervous, rheumatic and gastric affections, with much benefit, as well as in certain acute maladies.

The dose of the saturated tincture of black cohosh varies according to its effect upon the patient, from 1 minim to 60 minims, to be repeated three or more times per day; of the specific tincture, from 1 minim to 10 minims, repeated every two or three

hours; of the alcoholic extract, from ¼ to 1 grain; of the resin, from ½ of a grain to 3, and even 6 grains, three times a day; of the powdered root, from 10 to 60 grains, as may be required.

ŒNANTHE CROCATA.—In the December number of the Journal, I (H. L. Henderson, M. D, Plattsburg, Mo.) read an article on the above drug, from the pen of Dr. F. R. Waterhouse, to which I wish to add my mite of testimony.

I, like most physicians of this locality with whom I have spoken on the subject of epilepsy, find but poor encouragement in the treatment of this most obstinate of diseases by using bromides, which I find only give temporary relief.

About March, 1885, I received a letter from Dr. Waterhouse, in which he mentioned the use of œnanthe crocata, or water hemlock, in the treatment of epilepsy. I, like a drowning man, was ready to catch at a straw, for I, at that time, had on my hands three cases of that treacherous disease, which were giving me no end of vexation of spirit, and withal threatening my reputation professionally in as many first-class families.

I at once began, through my druggist, trying to procure the medicine, which after several failures we succeeded in getting from the Homœopathic Pharmacy of Humphrey & Co., New York, in the form of a "mother tincture." I medicated pellets No. 35, and directed my worse case to take two pellets every four hours. The spasms, which seemed to involve every flexor of the body, and which were in rapid succession, ceased immediately with the beginning of administration of the remedy, and from that time (June 1st) to this there has not been the least sign of an epileptic seizure. The patient still takes the "little pills" twice daily. I will mention one circumstance in connection with the remedy in this case that may point to its mode of action. The patient was a young lady of rather slender build. About one week after she had begun taking two of the pellets every four hours she complained of a headache, and full feeling in the head, resembling the headache from glonoine. I at once ordered one pellet every four hours instead of two, and the headache disappeared in a few days, when I again increased the dose, resulting in a reappearance of the same symptoms, and I was compelled to again reduce the dose. I am of the opinion that the drug causes a determination of blood to the nerve centres, thereby overcoming the anæmia on which, I believe, epilepsy depends.

I have used the drug in two other cases besides the one just described, with like results. One of the cases has been a confirmed epileptic for nine years, and has become almost an idiot; the spasms have ceased, and he seems to be in fair way to recover. I am now using it on a pauper at our county farm, who has been an epileptic for thirty years, and has been in the insane asylum on two different occasions, and each time has been sent back to the county as an incurable. I have been treating him but a short time, and the prospect for a cure looks very favorable. If any of the readers of the Journal have a bad case of epilepsy, get the medicine and try it! It must be given in very small doses.—*Eclectic Medical Journal.*

CIRCUMCISION AND REFLEX DISTURBANCES.—Dr. John M. Keating, visiting Obstetrician to the Philadelphia Hospital, in the Medical News, says:

As to the operation of circumcision, my experience enables me to say that if every child, shortly after birth, is taken in hand by a nurse or mother, and the foreskin pressed back, in a very short time, it makes no difference how narrow the opening in the foreskin may be, all adhesions will eventually be broken up, and the mucous membrane be loose enough to allow full erections to take place; but if this is neglected, as the child grows older it becomes much more painful, and a very much more difficult operation. I believe it is nearly always possible to break up adhesions and to retract the foreskin, but at the same time I think that a child, at the age at which this one is (two years), is placed in a far better condition in after-life by having the redundant foreskin removed and the adhesions entirely broken up. The operation takes but a few minutes. I have never seen it followed by any bad effects, and ether will render it painless.

You will ask me, possibly, whether the many nervous troubles of which we read are ever the direct result of preputial adhesions or elongated foreskin. I have never seen any lesions produced in the nervous system that I could not directly trace to this condition; but I have seen phenomena the result of reflex irritation caused by phimosis that simulated serious disorders of the nutritive system, possibly acting through nervous influences. I have seen reflex symptoms of disorders resembling the hysterical phenomena of adults produced time and again; and let me say that hysteria is a common thing, even in infants, but the most fre-

quent attendant upon this condition is a disturbance in general nutrition. The child will fail to grow stout and strong, despite all efforts on the part of the mother; nourishment seems to have but little effect upon it; it will fret, be peevish, flabby, and emaciated; the mother will worry, and she thinks her child has worms or that the milk does not agree with it. If you have satisfied yourself that it gets good food, you will ask whether it passes its water very frequently, and the answer will probably be, "Yes, doctor, baby is always wet." Here, then, you have the source of the trouble, and if you find an elongated prepuce, with a narrow opening excoriated at the end, reddened mucous membrane puckered up, I would advise you not to waste time, but to circumcise. The child will then grow strong and hearty; its flesh will become firm; it will sleep well; the restlessness will disappear; and you will be astonished at the change in its condition.

COMPOUND TINCTURE OF SERPENTARIA.—The old things our fathers used with so much success and which made Eclectic practice so popular, are as good to-day if we use them with the same discretion they did. Dr. John Fearn calls attention in the California Medical Journal, to this old and valuable remedy, and which is one of the many good things Dr. Wooster Beach gave us. As Dr. Fearn remarks, the remedy is a very powerful sudorific, and is used in cases where a copious perspiration is required, or when it is desired to lessen pain, allay nervous excitability and keep up a determination to the skin In very severe afterpains, dysmenorrhœa, amenorrhœa from exposure to cold, cramp in the stomach, hysteria, fevers and inflammatory diseases it may be given in doses of five to ten drops in hot sweetened water or tea, and repeated as needed. Whenever you get a suppression as a result of cold and consequent fever and pain, whether the suppression be of the catamenia, lochia or perspiration, I do not know of a remedy that will act more quickly and certainly than the compound tincture of serpentaria. Several cases are related by the doctor showing the prompt action of the remedy and the good it accomplished. One was pneumonia and pleuritis: man, 85 years old. Pain severe; breathing very short; skin dry; anxious countenance; sputa tough and raised with difficulty; both patient and attending physician anticipated dissolution. Dr. F., the consultant, recommended comp. tr. ser-

pentaria, ʒ ss, in warm tea, and repeat. The first dose gave relief; three more doses during the day; perspiration become profuse; expectoration become easy. After this he had a dose every evening till he got well.

Another case: A parturient woman took cold third day; took a chill; suppression of lochia; seized with violent pains, which occupied the whole abdomen. Skin dry; no tochia; no urine passed for a long time; a complete suppression of all the secretions. In the midst of her great suffering she was given a teaspoonful of the comp. tr. serpentaria in a cup of hot sweetened water; hot applications to the body; relief soon followed. Smaller doses were given at intervals, the secretions were reestablished in a few hours, and recovery at once set in. Other cases are reported in which the remedy was successfully used.

The formula for this compound. which is called sudorific tinct. or red drops, is as follows: ℞. Ipecac root, safron, camphor, Virginia snakeroot, opium, each, ʒ ij; all pulverized; Holland gin, 3 quarts; macerated two weeks; express and filter. Dr. Biggers uses diluted alcohol in lieu of gin.

THE Announcement of the Sixteenth Annual Meeting of the National Eclectic Medical Association at Atlanta, Ga., in June next, has been issued, and is published in this number of the Advocate.

The promise of a welcome reception is made in glowing terms. The Eclectics of the South consider this as their opportunity, and are resolved to let nothing be neglected. Governor McDaniel will deliver the address of welcome to the State, and Hon. George W. Hillyer, Mayor of Atlanta, will do the honors for the metropolis of the Empire State of the South. Special rates of board and railroad fare are contemplated; together with an excursion to the Southern Niagara, and very likely a banquet to the guests of Georgia. The Electric sentiment in Georgia is very decided. The leading citizens employ physicians of our school; and, during the war, Eclectic army surgeons were employed on equal footing with others.

President Piper's programme is admirably constructed for business. He is an excellent judge of men, and his appointments could not be surpassed. In his six sections, he has given us many new names, but generally of men well known in Eclectic circles. Professor Goss is a teacher and writer of much ability, and Pro-

fessor Durham has won golden opinions from members of the National Association. Doctors Yeagley and O'Neale are strong men, each a host in himself. Dr. Russell, of Ohio, has virtually made the Surgical Section, and his efficiency in former years cannot be too highly commended. Dr. Butcher is laborious, painstaking, and thorough; he is a man marked for success in his profession. Professor McFatrich is a coming man, intelligent, confident, and resolute. So we may go through the list, and find only men to praise.

The appointments for papers embrace new and old members. The topics are many, and mostly of a very practical turn; their treatment would make a very valuable collection. This year, all papers are circumscribed to fifteen pages of type. Short articles are generally sought after; but the working members are those who are desired to write, as knowing best what they are writing about.

The Mutual Aid Society will meet on the evening of the 16th of June. It will then proceed to perfect its organization. It thus becomes a most valuable auxiliary to our cause, and a bond of union between members, not easy to break. Physicians wishing to become members will apply to the secretaries of their respective State societies; members of the National have but to give their names to the secretary, Alexander Wilder, M. D. "And yet there is room."

Atlanta is a good place to visit. Even in hot weather, it is cooler than New York. Everybody that attends will always be glad of it.

In conclusion, we join in the utterance of our worthy President:

"This National Association is the authorized exponent of our principles, the recognized champion of our rights, the beacon-light of our hopes. By its utterances the people know our practice, our deservings, our excellencies. It is the bulwark of Medical Freedom in the United States; the protestor against Medical Bigotry; the leader in Medical Advancement. We strengthen it for its work; we help each other; we become wiser and better for attending its convocations, and doing our part to further its operations."

President Piper gives no uncertain voice. Every man reading the call of the National Association, knows where he stands on every question now before the medical profession. He is for Democracy in Medicine--the good of all, and not the supremacy of a class.—*Medical Advocate.*

SWISS TREATMENT OF CONSUMPTION.—An interesting report is given of the experiments made by Dr. Albrecht on consumptive patients in a hospital at Berne, Switzerland. These experiments were made with a view to ascertaining the effect of oxygen inhalation upon the development of phthisis, and whether, by increasing the rate of organic combustion by this means, the bacterium of phthisis had been discharged with certainty on several occasions. The patients were first submitted to an appropriate highly nutritious diet, consisting of milk and peptone, and twice a week they were weighed with great care. It was observed that as soon as the oxygen inhalations began the daily loss of weight was checked, and in some cases the weight increased, dyspnœa diminished, and the microscope showed fewer bacteria.—*Medical Notes New York Tribune.*

STRYCHNINE IN ACUTE ALCOHOLISM.—(The Practitioner, December, 1885) Dr. Lardnier has long employed strychnine in the treatment of delirium tremens, and regards it as the best remedy we possess for this condition—as, in fact, a veritable specific. He insists upon the necessity of giving the drug in large doses. In one case he had given granules containing each $\frac{1}{13}$ grain every two hours for several days without any appreciable result. He then increased the number of granules and also administered the drug in all 1⅔ grains in the space of twenty-three hours. The result was a most happy one. The patient soon fell into a refreshing sleep, never exhibiting the slightest symptom of strychnine poisoning.

IN NERVOUS DISEASES.—(Medical Examiner) Jas. H. Bullard, M. D., Pacific Junction, Iowa, says: "I have used celerina for nearly three years in my practice, and have found it all that is claimed for it in every respect. I have made one severe test upon a man who has been a drunkard for fourteen years, who could not sleep unless he had one continual opiate. I discharged him after three months, using nothing but the celerina in 13 doses, two to four times a day. I could cite many other cases, but in closing will say I believe every physician should have celerina in his office and prescribe it in all nervous diseases."

SCIATICA.—(Medical Record, January 23, 1886) Dr. Lewis, of Lone Pine, Pa., reports a case of sciatica successfully treated by deep hypodermic injection of cold water behind the trochanter.

AUTOBIOGRAPHICAL [ALLOPATHIC] ADVERTISING.—Says the Southern Clinic: In one of our exchanges we find the portrait of one of Baltimore's specialists, with a big advertisement in the shape of a biographical sketch, in which we are given a list of the specialist's wonderful "contributions to medical literature," and also a roster of his "most noted cases and the names of these patients." We wonder if the sketch is an autobiography, or simply intended as an advertisement. As it occupies the place of the leading article in the journal, and is found under the head of original contributions, perhaps it is only an original page from "Vanity Fair." But, on further consideration, we believe it was intended as an *obituary* notice, and was by mistake published a little prematurely.

HYDROCELE—COCAINE IN TREATMENT OF.—After withdrawal of the fluid from the hydrocele sac, inject a fluid drachm or so of a 5-per cent. solution of the cocaine, allow it to flow into the interior and diffuse over the walls of the sac, and, after five or ten minuses, inject iodine or any other desired fluid in the usual way. This procedure will insure absence of the acute pain iodine and other such irritating substances usually caused when used for the radical cure of the disease. The use of cocaine in this way allows kneeding of the sac after the iodine injection, which is one of the essentials of success in the treatment of hydrocele.

HYPODERMIC INJECTIONS OF ANTISEPTICS.—(G. S. Hill, M.D., Wilmington, O., in Lancet and Clinic) Last Summer I had several well-marked cases of typho-malarial fever, in which I used Listerine, both internally and as a hypodermic injection, with very good effect, more particularly from the injection in the more advanced stages; also as a prophylactic, or rather as an abortive in cases having well-marked premonitory symptoms, the subjects of which had been exposed to the same disease producing cause, being in the same families with those suffering under the fully developed disease, and in every case, without an exception, there was a rapid recovery.

I administer listerine, hypodermically, full strength, in from 5 to 10 minim doses to adults, and about the same amount, diluted one-half, to children, repeating daily as the case may seem to require. I have often administered it in much larger doses (hypodermically), both in typho-malarial and zymotic affections, and never observed the least unpleasant symptoms from its use. I shall hereafter meet this class of diseases with much confidence, and shall rely to a great extent upon listerine.

PARALDE-HYDE AN ANTIDOTE TO STRYCHNINE.—Experiments on rabbits and other warm-blooded animals have revealed the important fact that the action of strychnine in large lethal doses is antagonized by fairly large doses of paralde-hyde. In poisoning with strychnine, in man, it is advlsed to administer from 75 to 200 grains of paralde-hyde in divided doses during the day, and continue till the effects of the poison are overcome.

UMBILICAL HERNIA.—Treatment as follows: Roll a piece of white wax in the shape of a marble, then cut in two halves; next lay one of the halves *convex side down* into the umbilical depression, and retain it there with a strip of adhesive plaster. After a few hours the heat of the body will have softened the wax, it spreads out a little and adheres to the skin, and thus answers as a truss without any other support.

REMOVAL OF FOREIGN BODIES FROM THE NOSE.—(Medical Record, January 23, 1886) Dr. Bryson Delevan, of New York, recommends the local use of cocaine, on account of power to strongly retract the mucous membrane, diminish the sensibility and exsanguinate the blood-vessels, as a valuable aid in removal of foreign bodies from the nose.

IODIDE OF SODIUM in syphilis is of importance when the iodine is to be long continued in the treatment of the tertiary form of the disease. Many good men insist that the potash salt long continued in sufficiently large doses to be useful in these chronic cases is almost sure to damage the muscular structures, notably the heart. The dose of the soda salt is about 10 grains, well diluted, and repeated two or three times a day. The soda salt contains more iodine than the potash salt.

GUAIACUM in glossitis has been highly extolled by several practical men. Guaiacum was and is yet a positive remedy in acute tonsillitis and pharyngitis. Recently it has been found of equal benefit in acute glossitis, both by the stomach and locally to the tongue, by applying the tincture. Guaiacum was a popular remedy in chronic rheumatism; many practical men still hold to it with confidence in chronic rheumatism, and also in tonsillitis and pharyngitis, both acute and chronic.

STRYCHNINE hypodermically in nocturnal enuresis, in dose of 2-75th to 1-100th of a grain, has given good results in cases that had heretofore resisted all other adopted treatment.

FOR FROST-BITE—CHILL-BLAINS.

BY E. C. ROTHROCK, M. D., TEXAS.

As we have seen much suffering from this condition, we write a few prescriptions (some are original; others are not), thinking they would be of use to some one. The irritation accompanied with such intolerable itching is so great or intense in some cases that life is, at times, a burden. It may appear to those who have never been troubled with "chill-blains" that this is overdrawn; those who have suffered every winter with this trouble can, at least, appreciate my efforts:

No. I.—℞. Turpentine, Camphor (saturated tinct.) aa.....1 ℥,
Cajeput oil.....½ ℥,
Alcohol.....2 ℥. M.

Apply, with friction, night and morning.

No. II.—℞. Tinct. of myrrh, Tinct. of capsici. aa.....1 ℥,
Aqua ammonia.....2 ℥. M.

Apply twice a day; rub in.

No. III.—℞. Soap liniment.....1 oz,
Cajeput oil.....4 drops,
Cantharides, tinct.....4 drops. M.

Rub in twice a day.

BALSAM.

No. IV.—℞. Camphor, pul.....2 drops,
Benzoin.....1 ℥,
Iodide potassium.....3 drops,
Extract lead.....2 ℥,
Whisky, Rose water aa.....4 ℥.

Dissolve 2 ounces of soap in the whisky and rose water, then mix the whole, adding rosemary oil 2 drachms.

Apply twice a day.

ALMOND PASTE.

No. V.—℞. Bitter almonds.....4 ℥,
Honey.....3 ℥,
Camphor, pul.....3 drops,
Alum, burnt.....2 drops,
Olibanum.....2 drops,
Yelks of 3 eggs. Beat to form a paste.

Rub a portion on the parts affected, night and morning. Moisten with cold water, and wash off with warm water to produce reaction. The above is for unbroken chill-blains.

OINTMENT FOR BROKEN CHILL-BLAINS.

No. I.—℞. Iodoform .....1 drop,
Camphor, pul.....10 grains,
Cosmoline.....1 ounce. M.

No. II.—℞. Black oxide of iron..
Oil turpentine..... } aa.....1 drop.

Rub together, and add resin cerate-melted, 1 ounce.

No. III.—℞. Citrine ointment.....4 ounces,
Bark, Peru.....40 drops,
Zinc ointment.....1 oz. M.

No. IV.—℞. Cucumber ointment.....1 ℥,
Zinc ointment.....1 ℥. M.

Apply the above on cloth, twice or three times a day.

We can recommend all of the above; particularly Nos. 1, 2, 3, and 4, and Ointments Nos. 1, 3, and 4.

EDITORIAL.

PILOCARPIN

Has become a prominent remedy of late years. Its action is profoundly on the sympathetic system of nerves. The salient points in its action is profuse diaphoresis and salivation. It is a powerful depressant of the vasomotor centres, and, as far as can be noted, has powerful depressing action on the cardiac centres and nerves. The uses, in practice, it has been put to are numerous; seeing that one of the striking features in its action is to lower blood pressure generally, and in this way certainly promote the relief of heavy vasomotor excitation and remove extensive engorgements in many vascular areas.

In the treatment of puerperal convulsions, attended with high arterial excitement, hard pulse, heavy blood pressure, pilocarpin has done fairly well when the dose has not been too large. As a rule, the convulsions and other uremic symptoms give way as sweating and salivation are set up, thus removing heavy congestions from the splanchnic and cranial arterial areas. Several cases of the successful treatment of Bright's disease of the kidneys, acute and chronic, by pilocarpin, in moderate doses, have been reported. The remedy removed heavy vasomotor congestion of the kidneys by causing revulsion to the skin and salivary

glands, and, perhaps, most probably, other glands as well; thus lowering blood pressure and relieving the destructive tendencies that attend high blood pressure in certain organs, as the kidneys or nerve centres and other splanchnic vascular areas, the result of reflex irritations, coming from some other centre and transmitted by the ganglionic supply of the kidneys. In other cases, the irritation is located in the higher nervous centres which reflected to the splanchnic system.

Pilocarpin has been used in chronic neuralgia with success, especially in cases attended with hard pulse (high arterial tension), and in severe neuralgia of the internal organs—as the uterus, intestines, and others—it has given great satisfaction. Seeing that these internal organs are largely supplied by sympathetic nerves, and that the neuralgias of organs thus supplied is fearfully agonizing, the success of pilocarpin in such cases is often remarkable.

Small doses of pilocarpin—about 1-20th of a grain, and repeated in four or eight hours, as the case may require—are often successful in arresting a threatened attack of pneumonia, or when the chill and lung engorgement have already occurred. This serves to withdraw the colossal engorgement from the lung and distribute it in the skin. Of late days, we find medicine on the road to positive orders under the guidance of physiological knowledge.

THE COMMENCEMENT EXERCISES

of the graduating class of the Georgia College of Eclectic Medicine and Surgery, was held at De Give's Opera House on Thursday, March 10th. The house was well filled with an audience that appeared well pleased during the whole course of the exercises. The following are the names of the gentlemen to whom the trustees granted diplomas on the recommendation of the Faculty: John C. Bagwell, Robert J. Bagwell, John W. Carmichael, James T. Edwards, Elijah W. Green, Ga.; Samuel H. Harris, Texas; Franklin A. Martin, Ala.; John B. Parks, Absalom H. Wingo, Ga.; Daniel B. Williams, Ala. Dr. Williams is the son of our highly esteemed colaborer, J. W. R. Williams, M.D., of Opelika, Ala., one of the vice-presidents of the National. The son is a scion of the old stock that will be a credit to the profession. Dr. D. B. Williams delivered one of the best valedictory addresses we have ever listened to, so much

so that Dr. Goss paid Dr. Williams a high compliment on his conclusion.

The Rev. J. S. Lamar, of this city, delivered an able address on the occasion. Mr. Lamar said that Eclecticism is the right path to pursue in all things. That all truth was not exclusively in the hands of any one sect of religion or medicine. Eclecticism in politics, in statesmanship, in medicine, in religion is the demand of enlightened popular opinion.

Prof. A. G. Thomas conferred the diplomas in a neat little speech in which he expressed the pleasure it afforded him to present each of the claimants his "sheepskin," because they so richly deserved them by reason of the hard work and faithful labor they had expended in their endeavors to merit the prized boon.

The Dean's report was read to the audience. In it he showed that the College had a class of 59 gentlemen and four ladies; total, 63. The low per cent. of graduates to matriculate show that the Faculty were pains-taking, prudent and conscientious men, who were desirous that none but competent and well qualified physicians should be sent forth into the world to heal the sick.

The College is in a prosperous condition financially, and as an educational institution, has the confidence of the liberal medical profession in all sections of the United States.

PPOF. W. M. DURHAM, since our last writing, has had a relapse that was alarming to us all. We were full of anxiety for several days, but thankful to be enabled to say Prof. Durham is slowly improving since he was taken by Prof. Hand to his home in Calhoun county. On the last day of the session the students held a meeting and passed resolutions giving expression of sorrow on account of the illness of Prof. Durham, and appointed a committee to wait on him to present him tokens of their regard and esteem they have for him, and their hopes for his early recovery.

SALICYLIC ACID IN RHEUMATISM has long been a standard remedy with many practical men—some claiming that it has no effect on the heart complications; others, that it does prevent them to a certain extent. Regarding salicylic acid and its salts, the soda compound has been most in use. Few have thought or cared to resort to the ammonia combinations. We have fre-

quently called attention to the solution of salicylic acid in ammonia water, or, better yet, in solution of acetate of ammonia. This combination acts on the skin, on the kidneys, on the liver, and is a nervous stimulant of considerable value. In this way, salicylic acid has never caused any bad effects on the heart, does not irritate the stomach, and really does act as stimulant on the nervous system. One tablespoonful of acetate of ammonia will dissolve 30 to 40 grains of salicylic acid. We prefer to add 15 grains of salicylic acid to 3 drachms of acetate of ammonia, and this diluted with barley water. We have always found it best for the patient to have him take plentifully of water or weak teas. This dilutes the fluids of the body, and works off the poison through the kidneys.

AN ABSTRACT FROM THE REPORT OF THE U. S. COMMISSIONER OF EDUCATION FOR THE YEAR 1883-'84, Washington, D. C.—This embraces the seven Allopathic (or "Regular") medical colleges of the city and State of New York, on the one hand, and the seven Eclectic medical colleges that are recognized by the National Eclectic Medical Association, on the other hand. The report contains the dates of the session of each of these colleges for 1883-'84, and per cent. of graduates to matriculates for 1884, respectively, as follows:

Seven Allopathic or "Regular" colleges of the State of New York.

Name.	Matric'lates.	Graduates.	Per cent.
Medical Department, University, Buffalo,	136	63	46.33
Belleview Hospital, Medical College	484	149	34.3
College of Physicians and Surgeons, New York City	543	115	23
Medical Department, University, N.York	575	213	37
Long Island College, Brooklyn	116	37	31.9
Albany Medical College	149	43	28.9
Medical Department of the Syracuse University	46	11	23.9
General average			32.20.

Seven Eclectic colleges rccognized by the National Eclectic Medical Association.

Name.	Matric'lates.	Graduates	Per cent.
Eclectic Medical College, New York City	102	19	19.70
California Medical College	31	9	29
Georgia Eclectic Medical College	62	17	27.80
Bennett Eclectic Medical College	159	50	31.46
Indiana Eclectic Medical College	8	10	33 33
American Medical College	81	15	18.5
Eclectic Medical Institute	251	83	33
General average			27.46.

We have selected the Allopathic colleges of the city and State of New York because they are among the largest in the country, but more particularly to bring the subject matter closer home to Doctor Shrady. Inspection of the figures of both tables, and a glance, will show that, if there are any diploma mills anywhere among medical colleges, these "mills" are not of the Eclectic branch of the medical profession, as Doctor Shrady falsely asserted in an onslaught he made on the Eclectics in the issue of the New York Medical Record of November, 1885. In point of fact, the above tables show to what dirty slanders partisan bigotry will urge on some men to perpetrate. It is amusing to note that Doctor Shrady placed a patch on his Allopathic breeches that did not ornament the editor!

THE ALABAMA MEDICAL LAW—HOW IT IS ADMINISTERED.—The mud god "elevates the standard." We have the following facts from reliable authority, who is ready at any moment to produce the documents:

CHAPTER I.—A doctor, who never attended a course of lectures in any medical college or graduated from any medical college in the land, nor holds any diploma, not even a "Buchanan," is doing a successful practice in a city of Alabama—we think that city is Troy. He is more than the Allopaths of that place and its vicinity can get away with, because he gives his numerous patrons, who are among the respectable and intelligent class of citizens, more satisfaction than his Allopathic ("regular") competitors give theirs; hence he has many warm and substantial friends in the community.

CHAPTER II.—Time and again have the Allopaths (regulars) attempted to get him indicted by the grand jury of the county, for violating the State Medical Practice act. In this they have always failed, because many members of the grand jury know this doctor well; have employed him in their families; have seen that he has better success in his practice than have his Allopathic (regular) enemies; and, hence, have declared they don't want the doctor indicted, because he is the best doctor in the county. Now, these facts have come to the knowledge of the Allopaths (regulars) of the county. As a matter of course, the Allopaths (regulars) are utterly disgusted. Their pride is wounded. They find that the intelligent people of the county view them as poor and indifferent doctors—a conclusion arrived at honestly and by

fair contrasts. This is just where the Allopaths (regulars) find themselves losing ground—by intelligent, popular estimation of their worth and value by contrasting the results that grow out of the practice of those physicians, the so-called "irregulars!"

CHAPTER III.—This doctor then goes before the Board of Examiners and demands an examination. The board refuses to examine him, and treat him with a good lot of pompous and arrogant insolence!

CHAPTER IV.—The doctor leaves and returns with a thoroughbred lawyer of high standing, and makes the following demand of the board: "You must either examine, or give me a license to practice, under the law."

CHAPTER V.—The board, after brief consultation, grants the doctor a regular, formal license, sealed with their seal and signed by their hands, to practice medicine in the State of Alabama, under the protection and authority of the laws of the State, and of that board in particular!

We give these facts to the outside world, so that men may know how the mud god of Medicine reigns in Alabama. In Texas, the mud god wants the State to give him a patent of nobility like that he has in Alabama, Virginia, Mississippi, and North Carolina. The Allopaths—yes the law must protect them, or how will the mud god of Medicine prevail?

CORRESPONDENCE.

ECLECTIC MEDICAL ASSOCIATION, STATE OF PENNSYLVANIA,
Johnstown, Pa., January 23, 1886.

W. M. DURHAM, M. D.

Dear Doctor—While in Cincinnati a few weeks ago I arranged for a special rate from Cincinnati to Atlanta for Western Pennsylvania and Ohio members, who desire to go to the National. I will also get a low rate Pittsburgh to Cincinnati and return, for Pennsylvania.

This rate is much lower than the usual excursion rates, and should induce a large number from this State and Ohio to attend. Inclosed I hand you a copy of an order suggested by the General Passenger Agent of the Cincinnati Southern.

With kindest regards and best wishes for your success, I remain, Very truly yours,

HENRY F. BEAM, Cor. Seeretary.

EDITORIAL BREVITIES.

READ the advertisement of Park, Davis & Co. on first page of cover. This firm is noted for its enterprise and success in bringing out new and valuable remedies.

JOHN B. DANIEL, the live wholesale drug man of Atlanta. Give him a call, and send him your orders. Mr. Daniel is well and favorably known to our Southern readers.

B. KEITH & Co., 75 William street, New York City, are the manufacturers of Eclectic preparations that you can rely upon. Give them a call, and mention this journal. See their ad.

WE have received the Report of the Commissioner of Education for the year 1883–'84, Washington, D. C. We return Hon. John Eaton, the Commissioner, our thanks for this courtesy. We have made use of some of the valuable material contained in the Report, in another article.

LLOYD BROTHERS manufacture the specific tinctures. Their preparations have a large patronage. See their advertisement, and write to them, mentioning this journal. They are square men.

COLDEN'S LIQUID BEEF TONIC takes the premium everywhere. It is pronounced one of the best things the physician can resort to in all diseases of debility. Write to him for a sample, mentioning this journal. See advertisement on third page of cover.

THE PEPSIN manufactured by Carl L. Jensen, 2039 Green st., Philadelphia, Pa., is pronounced by all who have used it of very superior quality, and of such strength that it is economy to use it. See the advertisement in this journal. Send to him for a sample and mention our Journal.

H. M. MERRELL & Co. manufacture specific tinctures that are of superior quality. Mr. Merrell is one of the oldest and best known manufacturers of Eclectic remedies in the land. See their advertisement, and write to them, mentioning this journal. They are good, solid men.

TILDEN & Co., New Lebanon, N. Y., manufacture a preparation that has gained a world-wide reputation. The Elixir Iodo Bromide of Calcium Compound, which is pronounced by many physicians one of the best and most desirable alteratives at the command of the medical profession. Send to the firm for their epitomy of numerous cases, etc., and mention this journal.

PLANTEN'S CAPSULES, we have often said on other occasions, are the best in the land. We still hold to this faith, and recommend all our readers to use Planten's capsules. Thousands use them in lieu of pills, simply filling a capsule with the medicine and have the patient swallow one or more as often as needed. This way avoids the hazards and expense of pills, and, besides, you are always sure that your medicines are fresh and in first-rate condition.

VIBURNUM PRUNIFOLIUM, in dangerous flooding after childbirth, is said by Dr. Biggers to have given him better satisfaction than any other remedy. He uses the tincture as strong as it can be made, in doses of a teaspoonful, to be repeated in a few minutes if needed. Seldom are more than three doses needed. He also kneads the uterus through the abdominal walls thoroughly.

DRUGS, MEDICINES, CHEMICALS, ETC., FOR SALE.—I offer for sale a lot of glassware, drugs, medicines, office furniture, etc. Also a lot of anatomical plates, very useful to medical students, and a valuable medical library, consisting of about thirty-five or forty volumes. These goods will be sold at a considerable sacrifice to close them out at once. Address W. T. Christopher, Montezuma, or Mrs. M. A. Christopher, Reynolds, Ga.

THE DESCENT of MAN, by Charles Darwin. Complete in four parts of the Humboldt Library of Science. J. Fitzgerald, publisher, 393 Pearl street, New York. No. 77 of the Humboldt Library (a double number, price 30 cents) completes this great work. The price of the "Descent of Man" in this excellent edition is only 75 cents, and thus this most celebrated of Darwin's writings is brought, unabridged, within the reach of all classes of readers.

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ORIGINAL COMMUNICATIONS.

ESSENTIALS FOR MY POCKET-CASE, AGAIN.

BY I. J. M. GOSS, M. D., MARIETTA, GA.

We propose, for the benefit of our recent graduates, and other young physicians, to study our essential remedies first.

As regards the form of medicines most convenient and efficient, I prefer saturated tinctures, which I use in most cases; but there are some remedies, like Apocynum canabinum, digitalis, and some others, which, for some purposes, should be given in the form of fluid extracts. The pocket-case should contain from forty to sixty 2-drachm vials, or more.

We will now briefly notice our essential remedies, in alphabetical order, viz: Aconite—Through the cerebro-spinal nervous system, aconite acts upon the heart. In large doses, it produces paralysis of the inhibitory nerves, and greatly lessens blood pressure. In very large doses, it also produces vaso-motor paralysis; it also tends to paralysis of the cerebro-spinal nervous system. It greatly irritates the mucous membranes in toxical doses. It also irritates the stomach, producing vomiting and congestion. In lethal doses, it paralyzes the vagi and inflames or congests the lungs. It likewise inflames the serous membranes, and the tendons, when given in overdoses. Therapeutic action—In medical doses, say, from a fraction of a drop to one drop every one or two hours, aconite controls the heart's action, and lessens the temperature, and produces diaphoresis. Aconite is especially adapted to the first stage of all acute synochal and rheumatic inflammations, with full, bounding pulse, great heat, thirst, and restlessness. It is not applicable in the second stage of pneumonia, or in remittent and intermittent fevers. It is especially called

for in inflammation of serous membranes, mucous tissues, muscles, joints, tendons, and all ligamentous tissues. It is also called for in exanthematous fevers. It is applicable to the fever attending meningitis, pleuritis, first stage of pneumonia, peritonitis, tonsilitis, croup. and acute catarrh, endo and pericarditis, measles, scarlitina, small-pox, and infantile fever with a dry and hot skin. While it is useless as a routine remedy in typhus and typhoid fevers, yet to lessen heat and to prevent local congestions and inflammations it does great good, after proper antiseptic remedies have been given. It greatly opposes the febrile and the inflammatory process, if given in small doses.

Actea racemosa ; Cimicifuga ; Macrotys; Black cohosh, etc.—Through the brain and spinal cord, actea racemosa directly affects the entire nervous system. In overdoses, greatly irritating the muscles, and the female generative organs, producing neuralgic and rheumatic pains. It should not be given in large doses, which are toxical in effect. Therapeutical effect—In nervous, hysterical females, with neuralgic and rheumatic pains, this remedy, in doses of 20 gtts. every three hours, acts well. It is valuable in chorea also. I have often used it in chronic rheumatism of the larger joints, in alternation with salicylic acid, with good results. It is also a remedy for myalgia, pleurodynia, sciatica, etc. In dysmenorrhœa, amenorrhœa, chronic ovaritis, and leucorrhœa it will generally prove curative, in doses of from 20 to 30 gtts., given three times a day. Sharp lancinating pains in various parts of the body, associated with ovarian or uterine pains, indicates this remedy in females; and aching in the limbs, and soreness of the muscles of men or women, indicate macrotys. It is a very positive remedy in rheumatic dysmenorrhœa of nervous females, and should be given between the monthly periods until relief is obtained.

Æsculus hippocastanum (Horse chestnut).—Æsculus acts through the cerebro-spinal nervous system, directly upon the colon, rectum, and anus. If given in very large doses, like aloes, it produced portal congestion, and finally catarrhal inflammation. The filaments of the motor nerves emanating from the lower portion of the spinal cord, and that are distributed to the mucous membrane of the colon and rectum, are paralyzed, so as to arrest secretion of mucous, and constipation is the direct result, with whitish stools. Therapeutical action—In small doses, say from 3 to 10 gtts. of the saturated tincture, three times a day, æsculus

proves a very valuable remedy in hemhorrhoids. In cases attended with pain in the back, rectum, and anus, this remedy is indicated. Where the tumors are of a blue color, and protrude from the rectum, this remedy will prove curative. The cerate should be applied, while the tincture is given internally. In cases attended with prolapsus ani, and constipation, with hard and knotted stools, æsculus is the indicated remedy. It also acts well in cases of leucorrhœa, with pain in the back and sacro-iliac regions, in nervous females.

Aloes (Socotrine aloes).—Aloes act through the abdominal sympathetic, upon the liver, large intestines, and skin. It is uncertain whether, from the increase of bile, aloes act upon the intestines, or from nervous influence derived from the hypogastric plexus, or from both together. In large doses, long continued, the toxical effects of aloes are congestion of the rectum, tenesmus, then hemorrhoids; and, by sympathy, this congestion may extend to the entire pelvic viscera. In females, it will increase the menstrual flow, and, in pregnancy, abortion may result from large doses. As a purgative, the dose is from 3 to 10 grs. It requires from six to twelve hours for its action. A solution of 2½ ʒ of aloes and 1 ʒ of carb. of soda to 1 pint of water makes a cathartic, in doses of 1 to 2 ʒ, at night. Purgation may be regarded as the toxical action. Therapeutical action: I use the tincture of aloes (saturated), in doses of 1 to 2 gtts., as a remedy for diarrhœa, where there is tenesmus, griping pains in the rectum, with colic in the umbilical region. It may also be prescribed in dysentery where there is burning tenesmus in the rectum. It is also applicable in cases of hemorrhoids, when they protrude in bunches.

Agnus castus; Vitex agnus castus (Chaste tree).—This drug has a special affinity for the sexual system. In large doses it depresses the sexual desire, and if continued produces complete impotence. Therapeutical action—In small doses, say 1 to 2 gtts. every three or four hours, it is valuable in premature old age, or where young persons, from abuse of sexual instinct, have lost sexual power. It is also a remedy for loss of seminal fluid. In gonorrhœa, gleet, induration of the testicles, leucorrhœa in women, amenorrhœa, and in metorrhagia it has proved action.

Alumina; Oxide of aluminum.—Alumina has a specific action upon the mucous membranes, especially the vaginal and intestinal, but also affects the mucous membrane of the respiratory apparatus. It is indicated where there is dryness or a lack of mu-

cous secretion, with irritation. In chronic catarrhal affections this remedy will display its greatest power. In chronic bronchitis, pharyngitis, etc., also in leucorrhœa and passive gonorrhœa, small doses, say 1-10th gr., three times a day, will be found very active. It is also a remedy for prolapsus uteri and chlorosis.

Apis mellifica (Virus of the Bee).—Through the organic nervous system apis acts upon the cellular tissue, skin, serous membranes, mucous membranes, and glands, such as the ovaries, testicles and tonsils. In overdoses these membranes and structures are inflamed and become painful. Apis is useful in œdema of the skin, and mucous membranes, erysipelas, urticaria, measles, scarlatina, diptheria, hydrocepalus, hydrothorax, ascites, and in cystitis ischuria, strangury, and in ovarian and uterine irritation.

Apocynum cannabinum; Indian hemp, Silk-weed.—Through the cerebro-spinal nervous system apocynum acts upon the mucous membranes, serous membranes and the skin. Through the pneumogastric, apocynum produces increased secretion from the mucous membrane of the gastro-intestinal canal; and, in large doses, this results in nausea, vomiting, and, finally, purgation. It acts upon the kidneys, producing copious diuresis, hence is one of our best remedies in renal dropsy. In the various forms of dropsy this article has proved curative in many grave cases in my hands. I use the aqueous extract or the infusion; dose, 1 ʒ ter die.

Arnica montana; Leopard's bane.—Arnica acts through the cerebro-spinal nervous system, first upon the skin. In overstrength, locally applied, it is liable to produce erysipelatous inflammation; given internally, in large doses, it produces overstimulation, and paresis and myalgia of the muscles, gastro-intestinal inflammation, effusion and inflammation of the serous tissue, with great heat. Medical doses, say from a fraction of a drop to one drop, it acts upon the venous system, stimulating absorption. It thus becomes the remedy in all cases of concussion, sprain, bruises, and every injury from mechanical violence. It acts well in painful affections of the cutis vera and subcutaneous tissue, either traumatic or idopathic, etc. In traumatic erysipelas, arnica is a remedy of great value. The nervous starting of a fracture are quieted by it; it obviates the danger of reaction in concussion of the brain, and also averts sudden apoplectic extravasation. It really covers the remote effects of a traumatic injury, and should never be forgotten by the surgeon. It should be kept by railroad men for emergencies.

THE TONGUE IN DISEASE—DIAGNOSTIC AND CLINICAL NOTES.

BY LEMON T. BEAM, M.D., JOHNSTOWN, PA.

Before the Central Medical Association of Pennsylvania, at Johnstown, November 18th, 1885.

(*Continued from page* 5.)

And scrutinizing is far more important than the stethoscope, however skillful. The latter tells much of the amount and nature of the disease, it is true, but the former gives us information, often priceless, as to the precise line of treatment to be adopted. The tongue is the index of the state of the intestinal canal, and if the *primæ viæ* are disordered, they must be put right before any other therapeutic measures can be safely adopted. When we meet with special difficulty we should not be in haste in trying to arrive at a decision. We should think over the symptoms; examine our patient again; and, if necessary, watch the symptoms for a time.

Dryness of the tongue is found in pyrexia, whether the fever be specific or symptomatic. It is also dry in diabetis, and in some of the functional disorders of digestion. It becomes *dry and hard* as well as *brown* from the accumulation of dead epithelium cells upon it in typhoid fever and in uræmia. But we must carefully differentiate dryness resulting from other causes. When the mouth is kept open the tongue becomes dried, as seen in some forms of dyspnœa, nasal polipi, etc. When such causes as the latter are excluded, the dry tongue demands close attention. Food must be taken in such cases in fluid form, bearing in mind, too, that it and all fluids drank must be above the temperature of 100°. When the tongue changes from the dryness to a brown or black color, with sordes about the teeth, it means that the blood is in a septic condition, and not, as commonly supposed, due to a typhoid condition. Here a marked improvemcnt always follows from the best antiseptics with stimulants and tonics. Dryness may be found in vascular excitement, more particularly associated in excitation of the ganglionic and nervous system. Here the indications are for sedatives for the vascular excitement, and diaphoretics for contraction and excitement of the nervous system.

The tongue may be found *edentated*—marked by the teeth—in conditions of *debility*, from menorrhagia, chronic diarrhœa,

mental hebetude, or acute prostration, however induced. Then the saburra, or *fur* of the tongue should be especially observed. The state of the tongue known as "coated" or furred," calls for keen discriminations. A heavily coated tongue, with a deep yellow cast, especially at its base, is said to indicate liver trouble. Still tobacco chewers may have the "cast" and the liver be sound. I have noticed a white coated tongue in jaundice. Again, a "coated" tongue is constant with some individuals who are well and strong; and a "furred" tongue, especially in the morning, is common with heavy smokers. Such cases must be carefully diagnosed. But usually a *furred* tongue denotes disturbance of the digestive organs, or the oncome of acute disease, especially the specific fevers. When a coated and furred tongue is found associated with "chills" and shivering fits, with aching and soreness in muscles, this condition tells of coming trouble. When the coat is *thick*, it indicates gastro-intestinal trouble—that digestion and assimilation is imperfect—as it is indicative of a like coating on the intestines, with which the epithelial layer of the tongue is continuous; and our therapeutical and dietetic measures are here directed with a view to remove the obstructive layer. How readily we infer that assimilation is going on satisfactorily when the tongue cleans. We can inspect the tongue, therefore, in acute disease, in chronic disease, and in convalescence even, to great advantage. It is always well to see the tongue clean; but when illness is complained of, even if you find it clean, you must not infer that there is no serious trouble. In such a case you must look further than the tongue.

The *pinched* and *shrunken* tongue shows *atony* of the digestive tract as found in dyspetic troubles. The *elongated* tongue shows irritated conditions with determination of blood to the stomach and intestines. It will also exist in excitations of the nervous system, found especially in children. In these conditions irritant cathartics do harm.

The *fur* on the tongue consists mainly of dead epithelium cells, mucous, particles of food, and dust inhaled by the breath.

In *acute* disease the mucous membrane commonly is unequal to shedding its dead epithelium, and when the shedding occurs it is a good sign of returning vigor. In protracted illness the fur may be shed and reproduced again several times. After acute disease, and especially fevers, the fur may disappear bit by bit, commencing at the tip, and creeping along the edges; leav-

ing a thick coat up the mesial line and upon the base, which in time also disappears. Such clearing up of the tongue is of the best prognostic omen, and tells of uninterrupted convalescence.

A *furred* tongue is witnessed in many cases of dyspepsia, especially when "by-products" of digestion are formed in the digestive act. In such cases, laxatives and, perhaps, purgatives are of great service—free purgation, however, often leaves the tongue as thickly coated as before. In chronic cases of this nature, the patience of both doctor and patient become severely tried, but perseverance brings with it at last its reward. All *mechanical* means of cleaning the tongue, as *scraping* it, or rubbing it with lemon-juice or vinegar, are well enough for the local sense of cleanliness and comfort; but they are utterly useless as to cure, which depends upon other measures altogether.

Then again the tongue may be furred *along one side only*, or may be *raw* and *irritated*, or even *ulcerated* by a decayed tooth with a jagged edge. The epithelium of the tongue may be *stained*, as by drinking elder wine, sucking a piece of licorice; or it may be discolored by some preparation of iron, etc. These modifications of its appearance are more distracting and puzzling when the tongue is coated with fur pretty thickly.

The "raw" or "bare" tongue, is an appearance deserving of careful attention. Here the superficial structures of the tongue are denuded, more or less completely of the natural epithelium. In convalescence from acute conditions, where the tongue has been coated, sometimes it is *abnormally red* and imperfectly covered with epithelium. When we observe this condition we can look out for a recoating, as in such cases a coat is apt to form again. Both in acute and chronic conditions, the absence of the normal epithelial covering, whether slight or considerable, should receive the keenest attention of the practitoner. While the tongue is "raw" or "bare," the line of treatment to be followed is that of bland food and medicines. Everything of an irritating or cathartic nature must be avoided. Sedatives to the gastro-intestinal tract, as bismuth with hydrastia in weak, warm solutions of a mucilaginous nature, will be found effectual. But so long as this raw and bare condition remains, tonics or other general systemic remedies are not only useless, but are an actual damage—as they cannot be digested or absorbed.

At the risk of being charged with tediousness, I venture to insist upon this *bare* and *raw* condition. Perhaps it is in *phthisis*,

of all diseases, where this rawness of the tongue excites one's apprehensions; at least, it is, of all symptoms, the one I dislike to meet the most. It is not usually complete over the whole tongue, but lies as a large patch in the middle of the organ, the irregular edge usually extending further on one side of the mesial line than on the other. We have every reason for believing that this condition of the tongue is significant of the state of the unseen portion of the gastro-intestinal canal; and that the absence of the epithelial coat interferes with digestion and assimilation. This it is which excites one's apprehension in all wasting diseases. The epithelial layer of cells is not only important in the absorption of nutritive material from the food in the intestine, but it is essential to secretion, and digestion cannot ensue without the latter.

Since the epithelium cells play this important part, it is quite obvious that deficiency in number or perfection must exercise a deep and profound influence upon digestion, absorption, and nutrition. Hence the practitioner's energies should be bent towards the restoration of the epithelial layer to its normal perfection, or the best approach thereto. While it is comparatively easy to get rid of the layer of dead epithelium cells, it often taxes all our resources to restore the epithelial coat to its integrity. In some cases we will find that our best efforts will be futile. Remember that the *bare* tongue is the best index at hand of a deficient epithelial layer in the alimentary canal, and that our first duty is to restore it to the normal condition. When this is accomplished, the digestive power returns, and we may venture on tonics and the use of fatty foods. A shrewed practitioner, young or old, will always study the condition of the epithelial layer of the tongue carefully, sagaciously, with a full knowledge of what is revealed by the condition of that part of the alimentary canal which is open to our vision.

In *scarlet fever* the tongue often assumes a "strawberry" appearance; the *papilla* stand out on a red surface, like on a red strawberry; at other times the *red papilla* stand out upon a coat of fur, like the seeds on an unripe strawberry.

Then, again, the mucous membrane of the tongue may be ulcerated, as in stomatitis. Or, the tongue may be *fissured.* A "hagged" appearance, may exist in health. But *deep rugous fissures* are very suggestive of *syphilis.* So is a large *bare patch* with or without fissures, when there is no acute disturbance of

the health. The tongue may be the seat of a *chancre*, which must be discriminated from *cancer;* this is done by the history, the age, and the conditions of the glands of the neck. When other evidences of syphilis may be furnished by the state of the pharynx, or soft palate.

Cicatrices are observed in persons subject to epilepsy, as the result of wounds inflicted by the teeth during the paroxysms. *Coldness* of the tongue belongs to the moribund condition, without reference to the disease; it is said to be a striking symptom in attacks of epidemic cholera.

In conclusion I would say, that, while many conditions of the brain and spinal cord, and of the alimentary canal, and of the glands connected therewith, as expressed by appearances of the tongue, have not been mentioned in this paper, yet, I trust enough has been stated to demonstrate the importance of these considerations in our daily rounds to our patients.

ELECTRICITY—ITS USE AND VALUE IN THE TREATMENT OF DISEASE.

BY GRIFFITH W. D. PATTERSON, PH. D., ATLANTA, GA.

In my endeavors to direct the attention of the profession to electricity I do so from a knowledge of its great powers and wonderful effects, as well as with a consciousness that we are but in the infancy of its application as a therapeutic agent. I do so mindful that it has bore more of ill report than of good report; not because of ill in itself, but chiefly because it has been permitted to those ignorant of any scientific knowledge to, in the main, develop the modicum of good that has come from its use; and to its imperical application by those alike ignorant of its elementary principles, and of the most simple physiological truth or pathological conditions. Even those within the profession of medicine, who have undertaken to prescribe or use it, have done so in a haphazard way, using indiscriminately either electrodes or poles, as also making no choice of current, but on the contrary using which ever was most handy and gave the least trouble, and without regard to strength or direction of current: that is, without kind or quantity of dose. This must, as it has been fully and sadly demonstrated, bring failure and disappointment, as the result of such misapplication.

It requires as careful a selection of kind, quantity and quality

of electricity, when administered as a medicine, as in the use of drugs. No mere tyro can, as a rule, use it with beneficial results, than can the public in general use indiscriminately one or all of the extracts, tinctures or powders of the *materia medica*.

Electricity—its laws, so far as known, its manifestations in all forms, its physiological effects, and the properties peculiar to the static, galvanic and induced currents, to alter or change any pathological condition, and thus as Nature's remedy help Nature in her efforts to eliminate from the system and get rid of offending matter, causes of disease—requires study, application, judgment and confidence, to its intelligent use.

Woe betide him who uses it otherwise; failure, disappointment, chagrin and mortification must inevitably be his portion; and now to hide his ignorance of a remedy he attempted, his vials of wrath and bitter vituperation are poured out upon the unknown, unseen, poor little inoffensive and innocent power of the lightning box, when the fault was in stupidity or unwillingness, perhaps, to devote sufficient time to study the remedy he was *trying* to use—this his sole obstacle to success. So the shocking machine is laid aside by the patient being shockingly mistreated, and the physician shocked out of all proportion and common sense, if not shocking bad language as one of the consequences to both.

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I hope I may succeed in inducing at least a few of my professional brethren to investigate carefully and thoroughly an agent so potent for good; to study it closely, to master the main principles to its intelligent use; and so having learned all we know of it to-day (and that is far in advance of twenty-five years ago), as a remedial means to deliver into its probabilities and possibilities, and out of the great mine now opened, rich in precious pearls of promise, and in sparkling crystals of truth, watch the reward that awaits the studious, painstaking and eager practitioner, and it may be advance electricity to the front ranks in therapeutics, where I am firmly convinced it belongs, as no other one agent is so powerful for good in so many directions, and advance himself as one of the bright stars that go to make up that galaxy of brilliants, so ennobling and so beautifying the profession of medicine.

One obstacle to success in the use of electricity has been that both patient and physician, when they have consented to its use, have expected the impossible almost; that the lame could leap at once; that the blind would straightway receive their sight;

the deaf would immediately be made to hear; and, in fact, that every complaint ought to vanish as by a miracle, at the mere sight or sound of a battery, and the hopes and expectations not being at once realized, the battery has been banished to the realms of an undeserved contumely and disgrace.

Another cause, and one so entirely opposite to the truth, has been that it was regarded as a temporary stimulant, and that its good effects possessed no permanency. A monumental slander upon as powerful or gentle and lasting tonic as is in the whole domain of Nature, so far as we have yet been able to make any of her products or properties subservient to this purpose.

I do not propose to start nor take part in any argument that *Electricity is Life.* I have not yet saddled that pony, will leave it to those that have. A hobby rider, as a rule, has a sort of mustang under him, liable to *buck* at any moment and ingloriously precipitate one head first into—well, say a mudhole, from which one rises very much astonished and not at all improved in appearance; in fact, as a rider, the starch is taken out of him.

Electricity is electricity, one of the omnipotent forces of Nature, either manifest or latent, a power for good or for evil; what its substance, form or condition is we know not; yet, like steam, unseen, works out mighty problems, solves many difficulties, and is a necessity.

I wish to impress upon the profession to seek the surest and best means to help their patients; be Eclectic and choose the best, and in many instances a choice of electricity will supply your need and long felt want. It falls to the province of the Eclectic more than to any other school of practice to make this one of the features of his treatment. The Eclectic chooses remedies from all; he is in eager search if haply he may find some new one that shall be specific in its action. In therapeutics lead; let me urge upon him to maintain his advance. I advise him to get a battery, a good one; both a galvanic and a faradic, learn the indications for the use of the current, use it when indicated and it is possible, with a proper choice of current, regulate your dose, he will have cause to rejoice many times, as well as his patients, who will increase in number; his wallet will swell, not with unpaid accounts, but with the dollar of your daddy, and he can assume importance and dignity because of his success in developing a—at present—great unknown quantity in the *materia medica.*

To the young practitioner, I would say, you have a useful and wide field in which to use your energies, perseverance and talents; make use of it, cultivate it, win success, and benefit suffering humanity to your everlasting credit, and thus confer a boon upon mankind with which your name will be forever linked.

I know some one will ask if I propose using electrity alone and discarding medicine. To one and all I answer with a large NO! I would use it as I would any drug, when the indications call for it.

There are many cases to which a physician is called that electricity alone will cure; but it is not always possible nor even practicable, even in these cases to use it; drugs are much more convenient and will accomplish the desired result. Thus I would use it with prudence, judgment and intelligence.

Again, there are many cases that have gone the round of physicians and have been pronounced incurable; here comes in the battery most admirably, and with most happy results in all curable cases, and will help all incurables.

In many cases where the diagnosis is uncertain, prognosis doubtful, disease obscure, etc., certainty is evolved out of uncertainty; and obscure disease is relieved by a remedy of which we practically know nothing beyond its manifestations. Obscurity curing obscurity. A little Homœopathy here, *perhaps*.

In chronic disorders, especially of the nervous system and those originating in the nervous system, electicity is of incalculable benefit and should never be neglected as an adjuvant to proper medication.

My aim is and will be to so interest some, if not all who may read this and the papers that shall follow, that they shall be led to investigate, and seek more light upon this subject, and having found it, to make frequent use of the battery in their practice.

I shall endeavor to treat of the elementaries in such a manner as to make them plain and easily understood, and so systematize the articles that much of the opprobium resulting from a want of knowledge of the principles of the battery may be removed.

I am eager that Eclectics may grasp the opportunity that presents itself so fortuitously to them. People are tired of drugs and doctors and are ready for anything that comes recommended as a cure, witness the immense sales of patent medicines; so I

urge upon my brother Eclectics, to conjointly work the ground before them and reap the harvest that must come at no distant day to that school of practice which is ever in the advance, and still is looking eastward for more light, ready to catch the first dawn of the coming day that shall drive off the mists of obscurity and night; and to gather up the sunbeams as they fall and use them to heal the nations, and the crown that shall incircle the brow of Eclecticism will reflect the golden splendor of their achievements and be tipped, as it were, with the tears of grateful thankfulness that shall drop from eyes that suffer and were relieved, as diamonds pure and flawless, sparkling ever bright and radiant.

FOOD-CURE.

BY C. D. THOMPSON, M. D., OIL CITY, PA.

Hunger is the motive power of the human race; without it, there could be neither life nor progress. To satisfy the spiritual apetite, there is God; for the intellectual, there is Knowledge; for the social, there is Love; for the physical, there is Bread. We are so constituted that appetite grows on what it feeds upon. The more we know of God, the more we wish to know of Him; the deeper our insight into the mysteries of the created world, without and within us, the sharper is our intellectual appetite; love begets love in ceaseless generation; and the craving for food is in the direct ratio of the vigor and healthfulness of our physical organization. The satisfaction of appetite, in its various forms, is the sole object and employment of all living creatures. Only food can prevent decay, and decay is Death at work—Death alive. The man or woman who has no religious life is spirtually dead; the intellect unrenewed by knowledge grows dry and parched, and withers away; the affections with nothing to feed on gnaw the heart, and make life a desert; the body deprived of nourishment, loses its vitality and goes back to dust again. Not in this world can any soul hope to satisfy fully the longings of every appetite. Doubts and fears, find ignorance, like clouds, come between the aspiring soul and its God; various hindrances bar the hungry intellect from full access to the source of knowledge; Death snatches away the idols of our hearts, and leaves us desolate; and physical hunger, guant and grim, seemingly sole sovreign of many human lives, lives to the end. But we have

the promise, in the blessed time to come, they shall hunger no more, neither thirst any more.

Disease is only one form of decay, "so named from distinction, and with meddling with causistry." Wherever the line between disease and sin may run, decay covers both alike; hence food prevents disease; hence food prevents sin. But food must not be mixed with that which is not food. To do its work it must be pure. Right here let us make a very practical application of these statements: Many children are born with perfectly healthful appetites, and many are born with morbid appetites which can be traced directly to parental influences. To keep them quiet, recourse is had to Schnapps, soothing syrups, and various anodynes, which either create or foster a craving for artificial stimulus, and an immature life, the natural consequence of such grave mistakes, may be seen in the craving for spices and pungent seasonings; in the opium habit; the love of alcoholic beverages. Can any one doubt that, if soothing syrups containing opium were banished from our nurseries, the alarming increase in the consumption of opium in this country would be seriously and permanently checked? Applying the same principles to social facts: most children under eighty crave love, and hunger for it, and if they do not find it at home, seek it abroad; if they cannot have the reality, by and by, they try the counterfeit, and the counterfeit, like food rendered noxious by spices and foreign substances, only makes a bad matter worse. A happy home, where love dwells and blooms in gracious deeds, in kindly tones, in pure and sweet caresses, is the sole cure for social vandalism. No thoughtful person can pass along the streets where the so-called lower classes live without noting the continued recurrence of tobacco shops and liquor saloons, and how much more numerous they are than grocery stores and butcher's stalls. One uninstructed in the wants of the human stomach, might think that beer and tobacco are of far more importance as foods than meat and potatoes and bread are. Let one who habitually sits at a well furnished table, try to satisfy his hunger at a restaurant frequented by the patrons of these shops and saloons, and he will understand why recourse must be had to artificial stimulus to give the craving stomach, even for a little time, the sense of satisfaction. One cannot but think that, if the temperance lecturers in the field would preach the gospel of good food and put these useful but imperfectly nourished "lower classes"

in the way of supplying themselves with good bread and meat, and vegetables perfectly cooked, intemperance would immediately diminish. If Holly Tree Inns could be established side by side with liquor saloons, and the clamors of natural hunger be normally satisfied at moderate rates, can any one doubt that the inns would flourish and the saloons decline? Here is, indeed, work for the philanthropist. The fields are white to the harvest, but, alas! the laborers here are few.

To all of us parents this subject comes home with power. If we would send our children into the world fully equipped for the battles they must fight, let us see to it that, from the cradle, every part of their nature is nourished with convenient food; that they are instructed in those truths which are able to make them wise unto salvation; that in the abundance of books and periodicals, the "best of their kind," they may find ample satisfaction for their intellectual hungerings; that in the constant atmosphere of parental tenderness and love their affections may be made to bud and bloom, and the fragrance be enjoyed by all around; and that their bodies may be nourished into strength and perfection by pure and wholesome food.

BOOK-CASE.

BY C. D. R. KIRK, M. D., FERN SPRINGS, MISS.

Chester H——, æt four, a fat, well-formed little fellow, soon after eating from the half of a watermelon, by kneeling and drinking, was seized with a hard spell of coughing, which was so protracted and severe that his parents almost despaired of his life. A doctor was called in, and, strange to say, pronounced the case one of membranous croup! The writer was sent for next day. I found the little fellow quiet and breathing easy, but had had a second spell of coughing, and again lost his breath, and his face turned purple, with other symptoms of asphixia. I could not, from the history of the case, conclude that there was anything wrong, except that of a foreign body in the trochia—a watermelon seed. The parents were anxious that something should be done that would prevent, if possible, another paroxysm of coughing. I was not willing, under the circumstances, to perform tracheotomy, and explained to the parents that the make of the patient (a very short, fat neck) was very unfavorable; besides that, a melon seed was very hard to capture; but I would call in an experienced

surgeon (Dr. A. S. Kirk, of Louisville, Miss.), and would be willing to assist him if he thought proper to operate. We met next night soon after the little fellow had had another distressing paroxyism of coughing, and we, therefore, found the parents more clamorous than ever for relief- -their anxiety was decidedly painful. The consulting surgeon decided at once that a melon seed was the cause of the trouble, and advised tracheotomy to be performed immediately. The writer was aware of the danger of waiting, but argued that as the patient had been carried through so many very dangerous paroxysms, that he could be "spanked" through many more, and that there was a chance for relief without operating, but was overuled by the consulting physician, who thought the case would be no worse if we failed to dislodge the seed. Preparations were soon made and I began to administer chloform by inhalation, but the poor little fellow fought most desperately, and for a long time prevented the anæsthetis, but finally was partly exhausted, and went off with such cries for "Mama!" as no one but an old doctor could bear. The surgeon was met by many obstacles. A deep incision to reach the trachia, and then it was very small and rolled from one side to the other of the fat, chuffy neck, and was with not a little trouble finally made to be steady, and an incision made through its walls. There was a long and unsuccessful hunt for the seed! A finger could not enter the small "wind pipe" and instruments could not detect the foreign body, and, therefore, the operation was a failure! We had then to rest for a while with the hope that accident, Nature, a kind Providence, would come to our aid; but were soon awakened by the cries of the parents: "The boy is gone again!" But by treating with heavy blows between his shoulders, and holding his feet up, the seed was dislodged, and the sweet life returned! Again we retired, and was only permitted to sleep a few minutes when we were again hastily called up and "a fight for life renewed," but this time with only partial success, as we now had a collection of mucous and blood to contend with. We then enlarged the incision in the trachia and devised many snares with which to entrap the seed, but without success. From the incision to the lungs there was no obstacle in the way of breathing, but the gathering of blood and mucous prevented any air from passing to the mouth, so that when the wound was closed no breath could be breathed, and death by asphyxia would soon be the result. It was, therefore, neces-

sary to keep the wound open, and this was anything but an easy job; but finally a wire hairpin was inserted so as to flare the edges of the incision. This enabled him to breathe free and easy. As we had other cases to see, and had been detained a night and nearly a half day, we took our leave, but had not been gone an hour before the wire, by some move or other, was thrown out of place, and, although the nurse made a rapid effort to reinsert it, the little fellow died before it could be put in place.

I have been thus lengthy in reporting this case to impress upon the minds of doctors the danger of performing tracheotomy on unfavorable subjects, and for the purpose of extracting melon seed or small round peas. Better trust to time and the efforts of Nature, with heavy "spanks" between the shoulders, for the relief of paroxysms of coughing.

"LLOYD'S HYDRASTIS."

BY M. F. DUMAS, M. D., BALD KNOB, ARK

I wish to call the attention of the readers of the JOURNAL to the new preparation known by the above name, for several reasons. In the first place, Eclectics should use the best preparations on the market; they should use the most pleasant preparations on the market. The above-named preparation is both the best and most pleasant to take of any preparation of the Hydrastis can. I have ever used, and I have used hydrastis in some form for thirty years. Beginning with the crude drug, in powder, and infusions; officinal (old-fashioned tincture); fluid extract; "essential and concentrated tinctures;" "specific tincture," "liquid" and "fluid hydrastis;" phosphate, sulphate, and muriate of hydrastis, etc.—and "Lloyd's Hydrastis" excells them all. It excites the admiration of druggists, pharmaceutists, physician, and patient alike. It contains all the finer medicinal properties of the drug, and is freed from the objectionable properties—as color, and that disagreeable bitter taste accompanying the crude drug, and other preparations from the same. It is clear, colorless, permanent, non-irritating, almost tasteless, free from alcohol; is the best for external and internal use; of uniform strength, concentrated, cheap, and economical. It acts better in my hands than any other preparation of the drug. What more could we wish of any remedy?

I use it in a variety of diseased conditions, and it "brings the answer" every time.

In Anorexia, and fermentative dyspepsia, the following will do the work: ℞. Lloyd's hydrastis, fl. ℥ i; glycerite (spc) carb. acid, fl. ʒ i; glycerine, q. s to ad. fl. ℥ iv. M. S. A teaspoonful four times a day, three hours apart.

In Atonic Dyspepsia, I use the following: ℞. Lloyd's hydrastis, fl. ℥ iss; spc. tr. nux v., gtts. xx: spc. tr. podophyllum pel., fl. ʒ ss; pure pepsin, grs. 90; tartaric acid, grs. v; sherry wine, q. s. to ad. fl. ℥ iv. M. S. A teaspoonful at each meal, and at bedtime. With proper diet, this will cure more cases of dyspepsia than any other remedy in existence.

In chronic gastritis, and gastric catarrh: ℞. Lloyd's hydrastis, fl. ℥ i; spc. tr. diascorea, fl. ʒ i; glycerine, q. s. to ad. fl. ℥ iv. M. S. A teaspoonful three or four times a day.

For vomiting during pregnancy: ℞. Lloyd's hydrastis, fl. ʒss; spc. tr. nux v., gtts. x; spc. tr. ipecac, gtts. v; pure Catawba wine, q. s. to ad. O i. M. S. A teaspoonful three or four times a day.

In malarial fevers, and especially "chronic chills," the following is reliable: ℞. Lloyd's hydrastis, fl. ℥ is; Fowler's solution, ʒ i; spc. tr. grindelia squar., ʒ ij; Lloyd's elixir of calasaya, q. s. to ad. ℥ iv. M. S. A teaspoonful two hours apart until the paroxysms are checked, then three times a day for two or three weeks, and your case will bid defiance to "chills."

If you wish one of the best hepatic stimulants, or "Liver medicines," on the globe, try this: ℞. Lloyd's hydrastis, fl. ℥ i; spc. tr. teuonymus, fl. ℥i; spc. tr. leptandra v., fl. ℥ss; spc. tr. iris versicolor, fl. ʒ ij; spc. chelidonium, gtts. xx; spc. nux v., gtts. x; simple elixir, q s. to ad. fl. ℥ iv. M. S. A teaspoonful. This will remove portal congestion, and stimulate the liver, if anything will. Don't fail to try it.

Here is a universal spleen remedy: ℞. Lloyd's hydrastis, fl. ℥ i; spc. grindelia squ, ʒ i; spc. alstonia const., ʒ ij; spc. ceanathos Amer., ʒ i; spc. polymnia uved., ʒ ij; spc. nux v., gtts. xxx; simple elixir, q. s. to ad. fl. ℥ iv. M. S. A teaspoonful three or four times a day. In chronic cases, use the following liniment over the region of the spleen three times a day: ℞. Spc. uvadalia, antispasmodic tr., aa fl. ℥ i; spc. tr. podophyllum, fl. ℥ ss; oil sassafras, fl. ℥ i; chloroform, fl. ℥ ij. M.

For gastro-intestinal irritation, Lloyd's hydrastis, in 20 to 40 drop doses, is the remedy. Not long since an aged gentleman came under my care, who was in a very critical condition, to say

the least; vomiting up everything he swallowed; bowels discharging frequent mucous discharges, streaked with blood; no digestion. He had taken amydalus, aconite, baptisia, ipecac, nux, and sub. nit. of bismuth, as indicated, but growing worse all the while. I put him on 40 drop doses of Lloyd's hydrastis, and three hours apart, and in four day's time he was well.

In Chronic Ulceration of the Stomach, the following will act finely: ℞. Lloyd's hydrastis, fl. ʒ ss; spc. diascorea, gtts. xx; simple elixir, ʒ iijss. M. S. A teaspoonful three hours apart.

In gastric carcinoma, the following is the best treatment: ℞. Lloyd's hydrastis, fl. ʒ i; Fowler's solution, ʒ i; glycerine, ʒ iv. M. S. A teaspoonful as often as necessary.

In jaundiced conditions: ℞. Lloyd's hydrastis, spc. chicuanthus, aa ʒ i; spc. nux v., gtts. xx; spc. sanguinaria can., fl. ʒ i; simple elixir, q. s. to ad. fl. ʒ iv. M. S. ʒ i.

In ptyalison, scurvy, sore mouth, sore throat, etc.: ℞. Lloyd's hydrastis, ʒ i; spc. baptisia, ʒ ij; spc. caulophyllum, ʒ i; spc. phytolacca, ʒ i; water, q. s. to ad. ʒ iv. M. S. A teaspoonful four times a day, and wash and gargle with the same.

The same is useful in stomatitis, nursing sore-mouth, tonsillitis, sore throat, etc.

Use the following for "sore nipples": ℞. Lloyd's hydrastis, distill. hamamelis, spc. coca, aa ʒ i; spc. tr. arnica, gtts. x; spc. phytolacca, ʒ i. M. S. Apply to nipple after nursing child. Can't be beat.

In chronic cystitis: ℞. Lloyd's hydrastis, ʒ i; decoct. polygonum punct. (tepid), ʒ iv. M. Inject as required.

As an injection in gonorrhœa I prefer this to all others: ℞. Lloyd's hydrastis, ʒ i; distill. hamamelis, ʒ ss; glycerite carb. acid, ʒ i; aqua rosa, q. s. to ad. ʒ iv. M.

In vaginal catarrh and leucorrhœa, I prefer: ℞. Lloyd's hydrastis, spc. eucalyptus, spc. pinus can., aa ʒ i; glycerite carb. acid, ʒ ij: water, Oij. M.

For catarrh of uterus, and uterine leucorrhœa: ℞. Lloyd's hydrastis, ʒ i; spc. tr. sanguinaria, ʒss; spc. hamamelis, ʒ i; glycerite carb. acid, ʒ ss. M. S. Saturate a suitable size *prepared* sponge with the mixture, and place in contact with the os uteri; remove and cleanse every twenty-four hours; or inject 30 drops of the mixture into the uterine canal once a day, with a suitable instrument.

As a local application in burns, equal parts of Lloyd's hydras-

tis, glycerite carb. acid, and balsam copaiba. M. S. Saturate linen and apply to parts.

As a local application for cancer: R. Lloyd's hydrastis, glycerite carb. acid, spec. galium, aa. M. S. Apply constantly, and give hydrastis and Fowler's solution internally.

For granulated lids: Lloyd's hydrastis, hamamelis, rose water, and boric acid, cannot be beat.

Lloyd's hydrastis, glycerite carb. acid, and mur. tr. iron, aa, is the best dressing for chancres in existence.

For all catarrhal diseases of the mucous membranes (I mean by catarrhal, superficial inflammation, with a flowing of the exudation, mostly mucous, as well as muco-purulent catarrhs, of the gastro-urinary, naso-pharyngial, as well as other mucous membranes), Lloyd's Hydrastis is the remedy.

A CASE OF CEREBRO-SPINAL MENINGITIS.

BY JOHN C. BAGWELL, M. D.

An infant boy about 13 months old was suddenly taken with catarrhal fever, the temperature was very high, reaching 106° F. A short time after the fever was developed convulsions came on and lasted for ten hours. The child was constantly rolling his head from side to side, his hands and arms were constantly moving. There was considerable tympanitis. I could trace the colon all through its course nearly.

The heat was persistent. I gave him an injection of warm water to move his bowels and allay tympanitis, which were both accomplished, but stlll the heat and convulsions continued. About the third day very severe symptoms of cerebal symptoms came on, such as photophobia, constant frowning, as if suffering headache; rolling the head from side to side.

I ordered: R. Tr. verat. vir., 15 drops; tr. ipecac, 10 drops; water, about 25 teaspoonfuls. Teaspoonful every half hour or hour, until I got the system completely under the influence of the verat. var. The pulse was only affected slightly; the heat persisted; the case seemed desperate, for if such high temperature continued any length of time, as our Professor of Physiology used to tell us, was certainly hazardous to life. All my attention was now directed to the rapid, yet rational reduction of temperature. The best thing that I could think of that would do the work in the most systematic and prompt way was the wet

pack. I ordered a sheet wrung out of water about 85° F, in which I wrapped the child and covered him with dry blankets. This packing was changed every hour for the first few hours, then every two hours. The child was kept in the pack 144 hours continuously. He might have been out two hours in all during the time. This treatment reduced the temperature slowly. At last the whole skin was covered with a rash resembling measles, but was not measles so far as I can judge, yet, from the prevalence of measles in the neighborhood, may have been measles. There was no catarrh of the eyes or nose; no cough or other symptoms usual to measles.

The persistent high temperature above could not account for the exanthem. Perhaps the brain trouble was manifested in lieu of the usual pulmonary and catarrhal symptoms that attend measles. The wet pack properly used, though apparently heroic, is in fact the most rational mode of treating persistant high temperature in children. This case has been of great advantage to me, a young man just starting in practice, and I am proud to say that the teaching I received at college stood me in good stead in the hour of trial at the bed-side.

CASES IN PRACTICE.

BY JOHN W. MC MUNTRY, M.D., SUELLVILLE, GA.

I will give a few cases that have come under my care in practice. First, Mrs. C., aged 30 years. Menstruated regularly for the first five months of pregnancy; sometimes profuse. After which she went four months with no more menstruation. Gave birth to a well developed boy; labor natural. Now, this is one of three just such cases that have come under my notice. Will some old M. D. please give his opinion as to the above?

Case No. 2.—Mrs. J., called me in February 10th—labor; multifara; delivered a big boy; after which I worked for two hours trying to get a natural delivery of placenta to no purpose. After this I undertook to "scoop it away," when, to my discomfiture, I found the placenta filled with strings and adhering firmly to the uterus. I stripped those off the substance of placenta and broke the strings, thus effecting delivery of placenta.

The prospects that the next meeting of the National Association will be just what we Southern Eclectics earnestly hope and expect, are very good, which opinion I form from what I learn

of our Eclectic brethren in the South that I have corresponded with on the subject of attending the National. All tell me they intend to be in Atlanta to attend the National, and to this end are making arrangements. I know that we have many good men in our ranks in the South who are as animated with the spirit of progress, and are as earnest for organization and union of all the liberal elements in medicine in the South as our brethren in the North are. Southern Eclectics begin to realize the great necessity of active organization and united effort, without which there can be no substantial progress or protection against Allopathic usurpation of our rights. I think the Eclectics of Georgia are wide awake, so are those of Alabama and Tennessee, to the great importance of making the next National Association a grand success.

ABSTRACTS.

IN THE NAME OF FREEDOM a Mr. Lowry recently introduced into the House of Representatives the following joint resolution:

"*Resolved*, By the Senate and House of Representatives of the United States of America in Congress assembled, that it shall be a misdemeanor, punishable by a fine of five hundred dollars and dismissal from office, for any officer of the United States Government, civil, military or naval, to make discrimination in favor of or against any school of medical practice, or its legal diplomas, or its duly and legally graduated members, in the examination and appointment of candidates for medical service in any of the departments of the government.

SECTION 2. That all such examinations shall be open to the attendance and witness of all physicians, citizens of the United States; and that duly certified copies of the complete records of all the details of said examinations shall be placed on file in the office of the Librarian of Congress, subject to the inspection and use of members of Congress.—*Ex.*

NITRO-GLYCERIN, the Peoria Medical Monthly thinks, is likely to displace alcohol when a cardiac or cerebral stimulant is needed. One drop of the 1% solution of nitroglycerin is more than the equal of an ounce of brandy in such cases.

THERAPEUTIC APPLICATION OF GOLDEN SEAL.—Few remedies have so speedily and so thoroughly demonstrated the validity of their claim for a permanent place in the *materia medica* as golden seal. Its efficacy has been extensively tested by physicians during the past few years and its action in catarrhal inflammations is now regarded as a specific. Its antiseptic properties render it useful as a medicament in septic dyspepsia, but it is chiefly of service in the treatment of chronic catarrhal inflammations of mucous membranes, in gastro-intestinal catarrh, in chronic pharyngetis, laryngetis, bronchitis, aphthæ, urethritis, vaginitis and allied affections; either administered internally or topically, by injection or spray, it is invaluable.

Its oral employment was for a time limited on account of the inherent bitter taste of the preparations presented. It was soon discovered, however, that the presence of the bitter principle of golden seal was not essential to the preservation of its medicinal virtues.

Pharmacal skill now offers the physician a variety of preparations of golden seal and its alkaloids to choose from. That most often used has hitherto been the fluid extract golden seal. The bitter taste of the fluid extract, however, and the yellow stain inseparable from its topical use, has led many, although convinced of its efficacy, to resort to it less often than they would have done had it been free from the objectionable features mentioned. That colorless preparations of the drug are now offered, therefore, free from bitterness and irritating properties, is a matter of congratulation to the profession.

Among these improved preparations having obvious advantages over the fluid extract, we may mention "fluid golden seal, colorless," a sample of which, from the house of Parke, Davis & Co., we have now before us.

An interesting property of hydrastine, the active principle of golden seal, is the development from it by oxidation of a fluorescent principle which can be shown by adding a few drops of dilute sulphuric acid and a little potass. per mang. (solution 1.300) to fluid golden seal colorless, when a magnificent blue fluorescence is developed. Unlike æsculin this fluorescence is not increased or developed by ammonia.

CHANCROID—LOCAL TREATMENT.—Clean the sore with a strong solution of borax and Castile soap, then dry, and fill the sore full of salicylic acid, pressing it into the tissues and cover with a

piece of isinglass plaster. In the phagedenic chancroid it is best to remove all the infected and infiltrated tissue in the sore by scraping with a sharp cruette. When this is thoroughly done, fill the sore with oxide of zinc, cover with plaster. The pain that attends scraping can be avoided by a liberal use of a 5% solution of muriate of cocaine to the parts before the operation.

SACCHARATED PANCREATINE.—The Scientific American gives the following directions for making it. The pancreas is dissected [chopped fine] and macerated in water acidulated with hydrochloric acid for about forty-eight hours, then separated, and the acidulated solution of pancreas passed through a pulp filter until it is clear. To this clear solution is then added a saturated solution of sodium chloride and allowed to stand until the pancreatine is separated. This is carefully skimmed off and placed upon a muslin filter and allowed to drain, after which it should be washed with a less concentrated solution of sodium chloride and then put under the press. When all the salt solution has been removed, and the mass is nearly dry, it is rubbed with a quantity of sugar and milk and dried thoroughly without heat, after which it is diluted [with more sugar of milk] until 10 grains emulsify two drachms of cod liver oil.

CARBUNCLE treated by scooping out the nicrosed tissue and washing out several times per diem with antiseptic fluids, is reported by Dr. James Collins, of Philadelphia, as the most rational and successful. The scooping removes all the pathological tissue, the living sound tissue is known when reached by the denser structure of the latter. The worst symptoms developed in carbuncle are the result of absorption of the toxic fluids and coccii of the pathologicial conteuse of the peculiar inflammation of the tumor. The patient is to be placed under the influence of an anæsthetic while the scooping is being performed.

IODOFORM OINTMENT IN EPIDYMITIS ORCHITIS.—Careful observations with this remedy entitle us to the following conclusions: 1. Iodoform relieves pain sooner and more certain than all other topical remedies. 2. It has a very strong absorbent effect upon the enlarged testicle and does not possees the disadvantages of mercurial ointment. 3. The treatment with this remedy shortens the course of orchitis and prevents the usual induration. 4. The strength of the ointment may vary according to the severity

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SULPHATE HYDRASTIA (Berberina) strictly pure, in crystals.

Physicians should discriminate closely between *this article* and the impure cheaper forms in which the quantity of resinous and attractive matter is so great as to make their use dangerous, especially in the treatment of Chronic Conjunctivitis, Catarrhal Affections of the Bladder, and other delicate conditions in which *irritation must be avoided.*

CITRATE HYDRASTINA—(Hydrastia)

A Citrate of the White Alkaloid, intensely bitter and very soluble. This is a favorite form with many physicians who favor the White Alkaloid as a remedial agent.

HYDRASTINE—(Principles combined)

A combination of the White and Yellow Alkaloids, each carefully isolated, purified, and re-combined in their native proportions, as they exist in the root.

HYDRASTIA—Pure White Alkaloid, in crystals.

This Alkaloid exists in the root in very small proportions. It is coming into use, however, triturated with Sugar of Milk; and also in combination with Subnitrate Bismuth in the preparation introduced by us as "*Solution Bismuth and Hydrastia.*"

PODOPHYLLIN;—LEPTANDRIN.—

Both well known and universally used, both in this country and in Europe.

EUONYMINE.—

The investigations of Dr. Rutherford, under the auspices of the British Medical Association, have given this remedy an advanced position as a valuable remedy in all diseases having an Hepatic origin.

CAULOPHYLLIN.

A remedy of frequent and extended use in the treatment of Female Diseases.

CYPRIPEDINE.—

Nervine and Anti-spasmodic, and especially valuable in the treatment of Chorea, Hysteria, Nervous Debility, etc.

DIOSCOREIN.—

An almost indispensable agent in the treatment of Bilious Colic, either alone or in combination with Asclepedin.

HELONIN.—

As a *Uterine Tonic* this remedy is deserving of an extended use in all diseases peculiar to females; it also possesses *Diuretic* properties of value.

MACROTIN.—

This is the precipitated Resin of the Black Cohosh, with a wider range of medicinal action than almost any other of our indigenous drugs or their preparations. Its special province is as an Emmenagogue, Parturient, Tonic and Anti-Rheumatic.

NITRATE SANGUINARINA (Introduced by us).

For extended notes on this preparation send for circular. In *Croup*, Scarlatina, Diptheritis, Pseudo-Membranous Croup, Nitrate Sanguinarina has proved to be almost a specific; not only relieving the inflammation of the fauces, but also dissolving the adventitious formation.

SCUTELLARINE —

Nervine, Tonic and Anti-spasmodic. This agent occupies an important place in our list of Remedies. Recommended in Convulsions, Chorea, Hysteria, Neuralgia, Nervous Debility, etc.

We also manufacture all other remedies of this class in general use. For full list see our Price Current.

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State, first: Do you use specific medicines in your practice? Second: In what Journal did you see this advertisement?

ADDRESS

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of the case, but the average strength should be: iodoform dr. i; vaseline, oz. iv. To overcome the disagreeable smell a few drops of some ethereal oil, best oil of fennel seeds, may be mixed with the ointment.—*Med. Cen Ztg.*

DYSPNŒA as a symptom, as well as a troublesome affection, is difficult to manage satisfactorily, either to the patient or the physician. Dr. J. P. Bills, of Hydepark, Mass., writes to the Mass. Med Journal of his fortunately stumbling on the following combination in the treatment of this symptom, that, from the favorable results obtained from it, he gives it to the profession: R. Tinct. apocynii, gtts. ij; tinct. lycopii virg., gtt. vi. Put this into two tablespoonfuls of water and take at once. Repeat the dose in half an hour unless relief is obtained.

ÆNANTHA CROCATA in epilepsy is to all appearances the coming remedy, and if the half told of the great benefit obtained from its use in the treatment of this obstinate nervous disease is true, it will take rank with cocaine as a great discovery. The California Medical Journal calls attention to the successful use of the remedy to more extended notice and use. The dose would be between 1 and 5 drops, three or four times a day. Some physicians prefer to moisten homœopathic granules No. 30 with the tincture 2x or second dilution, and order 4 to 6 granules to be taken at a dose and repeated three or four times a day.

COLDEN'S LIQUID BEEF TONIC.—This excellent preparation has become deservedly popular with the medical profession in the treatment of diseases where an agreeable article of diet and tonics are required. It is recommended in typhoid and malarial fevers, consumption, loss of appetite, and debility induced by any cause, and it is tolerated when other forms of animal food are rejected. We invite those who have not used it to try it.—*Medical Journal, Baltmore, Md.*

EUCALYPTUS OIL is the remedy in all chronic bronchial and pharyngial inflammations, internally and locally. We order 2 to 4 drops to be taken three or four times a day. As a gargle, eucalyptus oil, ʒ ss; alcohol. ʒ ss. M. Sig. 30 to 60 drops added to 2 ounces of water. The oil of eucalyptus we have found a desirable remedy in the diarrhœa of typhoid fever and of teething children in summer. Be sure to obtain pure oil.

THE PERIOD OF INCUBATION OF HYDROPHOBIA.—In a communication to the French *Conseil d' Hygiene*, M. Dujardin-Beaumetz states that the duration of the period of incubation, in the fifty-eight cases of hydrophobia observed in the human subject since 1881, averaged only between three and four months; but M. Hallopeau and M. Tachard have lately reported a death that took place nineteen months after the bite. The Gazette hebdomadaire de Medicine et de Chirurgie remarks that this occurrence is among the most exceptional, but not so extraordinary as some others that have been accepted.—*N. Y. Medical Journal.*

OXALATE OF CERIUM is a fine sedative to the pneumogastric or vagus nerve. It is to be given in doses of from 10 to 20 grs. It cures coughs, heartburn, and other forms of cardialgia; hiccough and nervous palpitation. It is a good remedy in the outburst of diarrhœa of teething infants from irritation of the solar plexus.

EDITORIAL.

EDITORIAL BREVITIES.

PROF. JOHN KING, of Cincinnati, Ohio, writes Prof. Durham, stating that he will, if nothing turns up to prevent, attend the National at Atlanta in June.

A PASTE THAT IS GOOD FOR STICKING LABELS ON GLASS, WOOD OR METALS.—The Scientific American gives the following formula for making such a convenient and useful paste: Starch, 2 drs; white sugar, 1 oz; gum acacia, 2 drs; water, q. s. Dissolve the gum in the water, add the sugar, stir in the starch, and boil till the starch is cooked. We have made this paste, and find it the finest thing of the kind.

COCAINE LOCALLY.—Cocaine affords almost instant relief of pain in inflammation of the tympanum. A 4-per cent. solution is dropped into the ear. A solution of same strength applied to sore nipples at once renders the organ insensible to pain and a cure of the lesion soon follows. A 2-per cent. solution applied to the swollen and painful gums of teeting infants is soon followed by relief of pain and return of composure to the child. Cocaine is a two-edged sword. Look out!

STRYCHNINE AND HYDRASTIS IN DYSPEPSIA.—Eclectics are well aware of the great value of strychnine and hydrastis in the treatment of dyspepsia; yet we sometimes put too little faith in them when treating obstinate cases. Last summer we treated a chronic case of so-called case of irritative dyspepsia that gave us a good deal of trouble, at first, because too much dependance was placed on acids, pepsin, iron, malt and a host of other popular remedies. We had the patient under tinc. of nux and fluid hydrastis several times in various doses but apparently without much benefit; so these remedies were dropped for others. The sour stomach, heartburn, pains in stomach about an hour or so after taking food, red tongue, exquisite pain on pressure over pit of stomach, flatulence, and a host of nervous symptoms were ever present to wrong and annoy the patient, and mislead the doctor. After fairly becoming desperate on account of such flagrant failures, we returned again to strychnine, giving 30 drops of King's compound solution along with 20 drops of Thorp & Loyd Brother's fluid hydrastis, repeated three times a day, and always taken when the stomach was empty. All other treatment was discontinued. The patient was not as obedient to instructions regarding the selection and regulation of his food as was wished, yet he persisted regularly with the treatment. The action of these remedies on the mucous membrane of the stomach and on the nervous system was remarkable after a week of treatment had passed. All the acidity and pain of stomach steadily passed away, digestion went on in a quiet, normal way, and, as the patient expressed it, he began to forget he had a stomach.

We have frequently had good effects from strychnine and hydrastis in the treatment of dyspepsia, but this case was the most marked. The obvious import of this lesson is, push the strychnine till it has time to do good. Many cases of the so-called irritative dyspepsia comes from an abnormal state of the nervous system, and no doubt the nervous coat of the stomach is in a state of hyperæsthesia. The function action of digestion causes the pain and distress.

REDUCTION OF HIGH TEMPERATURE OF CHILDREN by veratrum viride is preferable to aconite. Verat. vir. lowers the tension of the blood pressure, sedates the heart and the heat centres in the medulla. As soon as the pulse is reduced in frequency the temperature falls as a general rule, though there are occas-

ional exceptions to this rule. A strong infusion or decoction of asclepias tuberosa is another potent reducer of high temperature. Professor Goss has recommended enema of cold water, 1 or 2 fluid ounces to be thrown up the rectum every fifteen or thirty minutes; soon the temperature falls. We all know the value of sponging the body of children with vinegar and watar at 70 or 80 degrees Fah. Repeat this frequently, and the action of verat. ver. is much aided in reducing high temperature. In violent cases, when the temperature is 107° F., we can resort to the tepid bath, temp. 65° F., or even 60° F., with advantage, to quickly reduce the high temperature. The tepid pack is not to be forgotten. We have reduced very high temperature in children by wrapping them in a blanket wrung out of tepid water, (80° F.), and covering the whole with a dry blanket. In one case of 107° F. we saw the temperature reduced to 100° F. in less than an hour this way. In scarlet fever, the heat runs very high at times, and is the cause of death in many cases. We have seen such children placed bodily into a tub of cold water, kept there ten minutes, taken out, dried, and put to bed; the temperature would fall to normal. This must be repeated if the temperature returns to the high mark. We have repeated this several times in one case with the result of breaking the dangerous degree of heat. Acetate of ammonia in combination with verat. v. (3½, and ½ drop) make a valuable antipyretic remedy. We do not place much trust in large doses of quinine or salicylic acid as reducers of high temperature, because they are dangerous remedies in the cases of children. Applications of cold water to the abdomen by a rubber bag, and often renewed, is a potent means of reducing temperature, because this causes a contraction of the overfull splanchnic vascular areas, which is a prolific source of high temperature. We know what a vast amount of heat is generated in the portal system, the spleen, the mesentery, etc. So we cause a contraction of these vessels and thus send the excess of blood to the skin, at the same time keep the legs and feet warm so as invite blood to the surface.

THE CENTURY for April came duly to hand, and again loaded with excellent reading, and among the highly absorbing articles is an account of the combat of the famous Confederate cruiser Alabama with the Federal warship Kearsarge. An other entertaining paper in this month's Century, is "Life on the Alabama."

All the incidents and historic events and circumstances that compelled the Alabama to try issues with the Kearsarge, are fully narrated by various gentlemen who were participants in the memorable duel.

A PHRENOLOGICAL CALENDAR FOR 1886.—The popularity of special calendars has been fully established, and we have here something entirely new, in the form of a Phrenological Calendar. It consists of a pictorial, symbolical, phrenological head about six by ten inches, beautifully lithographed in colors, on heavy card-board, which is cut out in the shape of a head and face. A key to the phrenological faculties and a full calendar for the year are conveniently attached to it. "We know whereof we speak" when we say, that in the recent flood of attractive novelties there has been nothing offered to the public equal, in actual value and proportional price, to this very unique calendar. It is an educator. Each day the peculiarities of friends will be studied out, and the reasons why they are or are not "thus and so" will be discovered; a pleasant pastime for a whole year is offered you for a very small sum. This is a reduction of the beautiful phrenological chart published by Fowler & Wells Co. last year, which is sold at $1.00. For the purpose of introducing the subject, the calendar, although about one half the size of the original, is sold at the low price of 10 cents, an amount merely intended to cover the cost of publishing. This may be sent to the publishers in postage stamps. Fowler & Wells Co., 755 Broadway, New York.

REDUCED RAILROAD RATES.

We call attention of all the Eastern delegates to the arrangements that have been made by President Beam for cheap fare to Atlanta, which you will find on another page.

SPECIAL RATE TO ATLANTA.

Dr. Henry F. Beam, Corresponding Secretary of the Eclectic Medical Association of Pennsylvania, has secured a special rate from Cincinnati to Atlanta and return, over the Queen and Crescent route, for delegates, members, and their families, who desire to attend the next meeting of the National. The rate for the round trip is fifteen dollars, a trifle more than the fare one way, and much cheaper than the usual excursion rates. This will be of interest to delegates from Ohio and Western Pennsylvania, and should be an inducement for every member in these sections to attend the meeting. Orders for these tickets can be procured by addressing Dr. Beam, at Johnstown, Pa.

[The arrangements that have been perfected by the local committee for cheap rates will cover the above.—EDITOR.]

REDUCED RAILROAD FARE TO THE NATIONAL.

We are pleased to inform the Eclectic medical profession that the local committee have secured reduced Railroad fare from all points East of the Mississippi to Atlanta, for all who will attend the National. This arrangement extends from Maine to Florida and New Orleans, taking in the city of Saint Louis, but not the State of Missouri. All those who intend attending the National Association at Atlanta next June will make application to the Secretary of the National (Prof. Alexander Wilder, M. D., 565 Orange street, Newark, N. J.) who will issue blank forms. The *delegates* to whom these forms are issued will sign their names in the presence of the ticket agent from whom they purchase their *going* tickets, and obtain them on the certificate of the ticket agent that they have paid full fare, with a description of the route of the ticket. This is highly necessary on the part of delegates and others who attend the National, as the agent's certificate will indicate that full fare has been paid for the going passage, and that delegates and others attending the National are entitled to special fare on their return.

Negotiations are now in progress to obtain the same favors from all the Railroads West of the Mississippi River, which we believe will be successful; but should these fail, then the Eclectics who reside in States beyond the Mississippi River can go to New Orieans, Memphis, or Saint Louis, from whence they can purchase through tickets to Atlanta and receive from the Secretary of the National an order for an excursion rate ticket to the point East of the Mississippi where they started from.

The Eclectic physicians of the North, South, East, and West will have a splendid opportunity of making the coming meeting of the National the grandest Medical congress of Liberal Physicians the World has ever witnessed. Out of this meeting of the National is bound to grow the most opulent results to Liberal Medicine.

Delegates from Iowa and Wisconsin can go to Chicago, and from which point purchase through tickets and get the benfit of return rates. Limited through tickets cost less than unlimited.

We intend issuing a circular to all Eclectic Physicians West and East of the Mississippi, embracing all particulars of importance regarding routes, rates, etc., and if our negotiations with the roads West of the Mississippi are successful will state these in all the particulars. We request all who desire further infor-

mation to address a card to Prof. W. M. DURHAM, M. D., Chairman of the Committee, Atlanta, Ga., who will be glad to send them information. *Southern Eclectics* are requested to apply to Professor Durham for blank forms on which to purchase their tickets to the National.

THE GEORGIA ECLECTIC MEDICAL ASSOCIATION

will convene in Atlanta on the 15th of June, 1886, at the College building, 48 Butler street. The Association is entitled to fifteen delegates to represent it in the National Association, which meets in Atlanta on the 16th, 17th and 18th of June. All Eclectics and other liberal physicians in the State are fraternally invited to attend and become members of our State organization.

All our present members are requested to make it a special obligation to attend the meeting and use their influence to bring all their liberal medical neighbors with them, and assure them that they will meet with a cordial and fraternal greeting and reception.

A. L. NANCE, M.D., President,
W. M. DURHAM, Secretary.

THE ALABAMA ECLECTIC MEDICAL ASSOCIATION.

The Eclectic Medical Association of Alabama, will convene its third session on Wednesday, May 5th, proximo, in the City Hall, City of Montgomery, Ala.

Hotel accommodations are tendered to members of the Association, at $1.50 to $2.00 per diem.

All persons attending the meeting of the Association are requested to report to Dr. King, D. D. Burks' Drug Store, No. 119 Dexter Avenue.

W. H. LAMAR, M.D., Secretary.

Auburn, Ala., March 26th, 1886.

[We sincerely hope that the Eclectic and other liberal physicians of Alabama will attend the meeting of the State Association and give all the support and encouragement they can to promote the cause of liberal and progressive medicine in that State. It is through the agency of organic union and association that grand results are achieved. The Allopaths all over this country are organized into compact associations, the main and chief object of which is to enable them to crush out liberal medicine. Nothing do these Allopaths so much fear as an equally compact organization of the liberal physicians of this country. The illiberal wing of the Allopathic Schoool of Alabama are

aware of the fact that they will be unable to cope successfully with the compactly united and organized liberal forces of that State. Brethren, conquest and empire await your efforts! The victory is yours!]

THE ECLECTIC MEDICAL ASSOCIATION FOR THE STATE OF ARKANSAS

will meet in Little Rock, on the 3rd Wednesday in May, at the Capitol Hotel. All Eclectic and liberal physicians are earnestly requested to attend and bring a paper expressing their best medical thoughts. E. H. STEVENSON, Secretary.

ATTENTION TENNESSEE ECLECTICS!

It is proposed by several Tennesse Eclectic physicians to meet in Nashville at the Union Depot, June 15th, p.m., in time to leave on the 7.30 train for Atlanta, to attend the National Association which meets June 16th. Will you come and bring others? Special rates have been secured over all trunk lines of railway throughout the South. All who wish to attend apply by letter to Dr. W. M. Durham, chairman local committee of arrangements, Atlanta, Ga., for blank forms to secure reduced rates.

W. H. HALBERT.

THE NATIONAL MEETING IN JUNE

promises to be the great Medical Congress of liberal and progressive physicians and surgeons of the United States. From every State in the South have we received letters from prominent Eclectic physicians informing us of the moral certainty of a large delegation from their State being in Atlanta on the 16th, 17th and 18th of June next. The outlook for a splendid meeting are as cheering and assuring as the most sanguine could desire. We have before us letters of recent date from Texas, Alabama, Arkansas, Florida, Mississippi, Tennessee, and South Carolina, in which the writers assure us that all the Eclectics with whom they have conversed or corresponded, entertain a lively appreciation of the good opportunity the Southern meeting of the National afford Southern Eclectics to advance the cause of liberal medicine in the South. The best men in our ranks in the South will be at the National. Every legally qualified liberal physician is eligible to membership in the National, and the com-

mittee extend to those a fraternal invitation to attend and become members of our national organization. The facts before us give assurance that the representative Eclectics of the North and West will be at the meeting. Since the prospects of the South being so well and thoroughly represented in the National next June, our Northern and Western brethren will be present in large numbers to make acquaintance with us and promote a more extended and intimate association and unification of all the liberal elements in the medical profession of the United States. Every one is now conscious of the vital fact that a compact union and association of the liberal element in medicine is not only possible, but already nearly accomplished, and the meeting of the National in Atlanta next June will make this desideratum a moral certainty.

THE INTERNATIONAL MEDICAL CONGRESS

that is vainly endeavoring to see through the dark cloud of bigoted intolerance and fanaticism that characterise the large part of the Allopaths of the United States has arrived at a state of uncertainty that always befall such unreasonably and nonsensical foolery. The Allopaths have some liberal men in their midst, but they are powerless for accomplishing any good for their school of physicians because there is not enough of them. The many have control of the Allopathic organization and they rule it. If they find it beyond their power to rule they will ruin. The International Medical Congress is not a sectarian institution in Europe, but as soon as it is proposed to hold a meeting of the Congress in the United States, then the intolerant spirit of Allopathy seeks to convert it into a purely sectarian concern.

The American Medical Association is the root of all the angry discussion and anarchial disturbances that have loomed up in the way of the Congress meeting in this country next year. Now, who is so blind in mental vision, or so narrow in breadth of mental grasp, as not to see that the American Medical Association and those Allopaths who are in accord with it, belong to a past age? The Allopaths have nursed a fanatical sectarian antipathy and antagonism toward the progressive and liberal schools of medicine for so many years, and have carried out a spirit of intolerance so long, that these vices now begin to recoil upon the men who practiced them, and are plaguing them with the curse that makes the bigot wail and writhe.

The liberal medical profession is now being thoroughly organized and established upon solid foundation of endurance and activity, so that those liberal Allopaths who are not in accord with the American Medical Association and its satelites may find a congenial home in our Association, where they will be received with a cordial greeting. As soon as the liberal wing of the Allopaths see we are able to maintain our ground and repel the assaults of the illiberal wing with interest, the liberals will be with us. The old hull of the American Medical Association belongs to mediæval ages and must go under the waves.

ATLANTA AS A SUMMER RESORT.

Many gentlemen residing in the North and West have written letters inquiring what kind of weather we have in Atlanta during the Summer. In reply, we say that the temperature in Atlanta in June, July and August is lower than any city of the North—not above Boston, Chicago, New York, or Cincinnati. Last year the National Teacher's Institute held a six week's session during July and August in Atlanta, and enjoyed the congress to the fullest extent. All the Northern and Western delegates, as far as we heard of, were agreeably surprised to experience such pleasant weather, while, at the same time, the thermometer stood several degrees higher in Northern cities. If you will consult the United States weather tables for June, July and August of almost any year since the register has been kept, you will find that the Summer temperature of Atlanta is far more pleasant than that of many Northern and Western cities. We say that it is impossible for any epidemic to get a foothold in Atlanta. We are nearly *eleven hundred feet above tide-water!*

THE HISTORY OF ÆSCULAPIUS AND THE ALLOPATH,

the so-called "Regular Profession." Æsculapius was a great doctor; his practice was remarkably successful, because he was a liberal and progressive physician of the Eclectic School. He brought great skill to bear in his practice which made him popular, and when he could not cure his patients with his ordinary medicines, allowed them to go defunct, after which he restored them to life by his miraculous skill. Was called in consultation to attend a renowned patient named Hippolytus (son of Thesus, King of Athens) who was torn to pieces by his own horses.

Æsculapius found him dead on the hands of the Allopath doctors, and then proceeded to exercise on the corpse the miraculous skill of his art, and thus was Hippolytus restored to life by the great Æsculapius. As will be readily believed, the Allopaths of that day were enwrathed against Dr. Æsculapius whom they termed an "irregular practitioner," and therefore sent Dr. Pluto, the President of the then American Medical Association, to the Pantheon to demand repressive legislation and stop the "irregulars" from practicing and to kill off the most distinguished of them. History informs us that Dr. Pluto succeeded in obtaining this legislation and so Governor Jupiter killed Dr. Æsculapius. This is the first historic account we have of Allopathic persecution, and the descendants of Dr. Pluto, the present Allopaths, still maintain the *esprit de corps* of this persecuting Old School doctors. The Allopaths have come from a bad lot, don't you see!

A HIGH MORTALITY IN THE FULTON COUNTY Prison among the United States prisoners confined there, reminds the authorities of the county that the jail is in a highly unsanitary state. The recent appalling mortality in that prison reminds us of the great French physiologist, Cl. Bernard. This savant confined a recently captured sparrow under a bell-glass for an hour and a half, during which the creature showed no signs of distress from its confined quarters. At the end of this period, Bernard introduced another recently captured sparrow under the same bell-glass with bird No. 1. In less than two minutes bird No. 2 began to show signs of distress, and in a minute more convulsions came on it, which lasted a short while, and in five minutes more bird No. 2 was dead, while bird No. 1 was still lively. On being liberated after one hundred minutes close confinement, bird No. 1 was lively and apparently in a vigorous state.

This teaches us that people accustomed to live an active life in a pure atmosphere will soon sicken and die when incarcerated in a house where the air is filthy and poisonous. This is why there was such a fearful mortality among the United States prisoners, and who were mostly from the mountains, and had not the humane Judge of the United States Court, Judge McKay, come to the rescue, the mortality would have been more murderous than a cholera epidemic or an earthquake.

The Fulton county prison is not what it should be in point of sanitary surroundings. Why?

POINTS OF PRACTICAL IMPORTANCE IN OBSTRUCTED HERNIA.

A hernia that becomes strangulated in its first descent (recent hernia), the symptoms are always acute, and the success of the taxis to reduce the strangulation and remove the obstruction is more than doubtful in 90 per cent. of these cases. The longer the taxis is used the surer the operation for hermiotomy is to fail, for obvious reasons.

Old inguinal hernia that becomes obstructed, the symptoms are less acute; in fact, more chronic, and in these cases the taxis is much more likely to succeed, and may be applied for a longer time.

A person the subject of hernia, and making complaint of colic, the hernia should be very carefully investigated for strangulation, for colicy pains are the first symptoms often complained of in cases of old hernia becoming obstructed.

As a rule, it may be set down that stercoraceous vomiting is a sign that the taxis should not be used at all in any case of hernia in which it appears, and the only scientific procedure is to resort to an operation at once. This rule observed, the operation for strangulated hernia is infinitely more liable to succeed than otherwise.

Bryant, in his superb work on Surgery, says that the taxis in any case should not be applied longer than two to five minutes. This rule is apparently arbitrary, yet experience has developed the fact that more cases of strangulated hernia die on account of over-use of the taxis than from hermotomy when the taxis has not been used, or used very briefly before the operation. Bryant's rule is: place the patient under the influence of chloroform before resorting to the taxis, but have a clear understanding with him that, in the event of the taxis failing to reduce, then you shall proceed to perform the operation for the release of the strangulated gut.

Hamilton and other surgeons of experience say that the taxis has killed more people than have undisturbed or unmanipulated strangulated hernia.

In recent hernia that is strangulated the sac need not be open as the obstruction is nearly always outside the sac. In old hernia strangulated, if division of the constricted ring does not permit the gut to go back the sac must be opened. Facts show us that in old hernia there may be a constriction by bands of false

membranes, which have been of recent formation resulting from some inflammation within the sac, and these must be broken up, to do which the sac must be opened.

Old femoral hernia that has become strangulated is far less amenable to the taxis than old inguinal strangulated hernia, and so the operation for hermotomy is more demanded in promptness. Again, in old femoral hernia strangulated, instead of opening the sac, it is best to dilate it with the finger and push the gut back into the abdomen, after a small opening has been made.

These rules are never to be forgotten in the treatment of hernia. We will say more on the methods of treating strangulated hernia by manual means at another time.

FACTS FROM THE CENSUS OF 1880.

POPULATION OF THE UNITED STATES, 50,155,783.

Families in the United States	9,945,916
Dwellings in the United States	8,955,842
Persons to a square mile	17.28
Families to a square mile	3.43
Dwellings to a square mile	3.02
Acres to a family	186.62
Persons to a dwelling	5.60
Persons to a family	5.04
Number of deaths per annum	756,893
Annual death rate per 1,000	16.01
Death rate among whites	14.74
Death rate among colored	17.28
Annual death rate among white males per 1,000	15.35
Annual death rate among white females	14.81

There were 881,851 white males in excess over the white females in a total white population of 43,402,970.

Of the colored population, there was an excess of 74,563 females over males, the reverse of the whites.

The annual death of colored females 1,017 to 1,000 males.

In all the large cities whose vital statistics we have examined we find an excess of females over the males of the colored race.

The death rate, white and colored races, respectively, in the returns of ten cities that we have examined give the following proportions per 1,000 of population: Charleston, S. C., white, 23.78—colored, 48.02; Baltimore, Md., white, 22.71—colored, 37.62; Washington, D. C., white, 18.81—colored, 35.17; Sa-

vannah, Ga., white, 23.70—colored, 44.60; Louisville, Ky., white, 20.03—colored, 34.57; Richmond, Va., white, 19.12—colored, 31.97; St. Louis, Mo., white, 19.23--colored, 32.44; Memphis, Tenn., white, 14.08—colored, 39.04; Nashville, Tenn. white, 14.88—colored, 24.36; New Orleans, La., white, 22.41—colored, 35.68.

We recently saw a report of the death rates of the white and colored troops, respectively, of the British Army in the West Indies, in which the white mortality per 1,000 men was 17.21, and of the colored it was 26.41. We also saw some statement of facts respecting the death rate of the colored population of Philadelphia, Pa., where the number of children under one year old that die annually exceeded that of the whites nearly two to one.

The following facts give some idea of the dreadful mortality that prevails among colored children in the South—the proportions are in the 100 whites and blacks under one year old: Alabama, 7.76 white—colored, 11.30; in Arkansas, white, 9.91—colored, 10.96; Delaware, white, 11.91—colored, 14 81, Georgia, white, 8.21—colored, 11.17; North Carolina, white, 8.87—colored, 11.74; Florida, white, 5.88—colored, 7.33; District of Columbia, white, 17.32—colored, 32.10; Louisiana, white, 9.24—colored, 10.08; Mississippi, white, 6 97—colored, 8.70; Maryland, white, 15.25—colored, 18.87; Texas, white, 9.80—colored, 10.78; Virginia, white, 7.46—colored, 13.91; Tennessee, 9.75—colored, 13.37; South Carolina, white, 7.46—colored, 11.32. These figures show that the annual mortality of colored infants under a year old is very much in excess of white infants of the same age.

Recently we saw a statement in a New York City paper that the mortality of colored children from birth to five years old, in the North in general, was over 30 per cent. The birth rate of the colored population is considerable in excess of the white, in the United States, but the greater death rate of colored children than of white more than outweigh the advantage of birth. The difference in mortality of the two races is not a mere accident or from more unfavorable surroundings of the colored race. We think the difference is due to stamina of constitution. The mortality of the colored people from tuberculous affections is notorious. Pneumonia is far more fatal among them than among the whites per 1,000 of each. A very large number of the colored people are dying of diseases of the kidneys and heart.

OPERATION FOR STRANGULATED UMBILICAL HERNIA is so often followed by death that any help that will reduce the mortality in these cases is desirable We note, in the Medical Herald for September. an article (taken from the Birmingham Medical Review) by Mr. Thomas F. Chavasse, on this operation, in which he says his operation consists in making a small median incision immediately above the neck of the hernial sac, introducing the finger from above downwards into the ring, dividing that structure upwards, either outside or inside the peritoneum, and returning a portion only of the strangulated contents. The main point to observe (as the author so plainly shows) is to relieve strangulated umbilical hernia by a small incision above the neck of the sac, and, first, make an extra peritoneal division of the upper border of the ring; but this failing, an intra-peritoneal one in an upward direction and a reduction of *only a portion* of the sac's contents. Bryant, in his Surgery, says on this topic: "It is a matter of immense importance that no manipulation of the contents of the sac should take place, because when the sac is opened and the parts exposed it is an exceptionable occurrence for a cure to follow—no cases of hernia under these circumstances being more fatal than umbilical. When the sac is not opened, however, so as to expose its contents, or only opened at the neck to allow of the division of the strangulated orifice, a good result may be expected." Bryant further says: "In irreducable hernia of large size, and of long standing, when reduction of the contents of the sac, as a whole, cannot be expelled, and there is no evidence of strangulation within the sac by some of its contents, the surgeon should be satisfied with relieving the strangulation by dividing the neck of the sac, and leaving the case to Nature." The principle and practice laid down in the foregoing should never be lost sight of in operating for strangulated umbilical hernia.

NOURISHMENT FOR CASES OF LOW FEVERS AND INFLAMMATION is often a serious problem to solve. We need a combination of carbo hydrates, fats and proteids, that will not overtax the enfeebled digestive organs. Recently we had a case of low catarrhal pneumonia in an old man that gave us a great deal of anxiety, because he was very feeble. His food did not digest; he was dying by inches. Medicine was out of the question, to do him any good. We found milk was next to poison to him. We, by good fortune, hit on a combination of beef essence, fresh milk and lime water, equal parts of each This food was given liberally, as he relished it, and it did him a great deal of good, for he soon began to mend. The heart-sounds, that were feeble, soon grew stronger; heart systole more vigorous, pulse stronger and slower—it had been 135 per minute. We also made a pap out of wheat flour, prepared in the following way—an old thing, as you may say: Tie a cupful of wheat flour into a bundle made of a piece of cotton goods; boil it for several hours in plain, soft

water. At the end of the process the flour is found to be a hard, dry cake. Grate this, a tablespoonful of it, and stir it into a boiling fluid of two parts milk and one of water. This makes a splendid pap, easy of digestion. We mixed this and beef essence in equal parts and fed the food at stated intervals, two or three tablespoonfuls at a time and often repeated. Sometimes it does well to drop a pod of red pepper into the making of beef essence, and thus you have an agreeably flavored food. We make beef essence by chopping up lean beef into mince. This is transferred to a wide mouth bottle, and the bottle is placed into a vessel of cold water but not so as to allow the water to run into the bottle, which is not to be corked. The vessel is then placed over a slow fire; the water heats gradually, then slowly boils, and the juice is thus extracted from the beef, which latter is found to be hard and tough. The juice is the beef essence. We have use for beef essence as food for the sick as a stimulant to the vegetable system of nerves. We never give it alone, but prefer to add it to pap and milk, as already observed. Sometimes we may make an emulsion of yelk of egg and glycerine, equal parts, or two of egg and one of glycerine, and to this add some cold beef essence. The combination is valuable, because we have a stimulant, a proteid, and a carbohydrate or hydrocarbon in the glycerine, which gives us a splendid food in cases attended with deep prostration. We have no love for raw eggs or egg-nog. Remember to feed your typhoid patients a fair quantity of pure water to wash out the tissues. Water is too much neglected as a food to the acute sick.

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ORIGINAL COMMUNICATIONS.

ELECTRICITY IN MEDICINE.

BY GRIFFIN W. D. PATTERSON, PH. D., ATLANTA, GA.

In submitting these papers I have two objects in view: one, and the chief one, to interest and, if possible, instruct those who know nothing of electricity, its laws, the terms used and their definitions as applied to it, and the different forms and the methods of its application in therapeutics, thereby inducing some of the younger members of the profession, especially, to enter upon a study and investigation of its powers and adaptability to relieve and cure disease, and pursue it with eagerness and heartiness of research; and, secondly, to call forth from those, who do understand its application in disease and have had clinical experience, and have formulated therefrom methods that prove satisfactory to themselves—a co-operation of effort to bring about a more general and intelligent use of this great agent of nature to heal nature's wounds and infirmities, and assist her in her efforts at restoration and resolution.

With these objects in view it will be necessary to commence at the beginning and state some of the most simple facts and laws relating to electricity, giving plainly such elementary principles that any one may, by careful reading of them, use all forms of electricity as applied to medicine, understandingly and with an assurance of an expected and desired result. So, if some very simple, yet fundamental truths are stated, as to call forth the thought, *every one knows that*, it will be with the purpose to induce one and all to utilize the *I know that*.

The three forms of electricity are magnetic, or that manifestation we find in the magnet; static, or franklinitic, that where

it is developed by chemical action and includes galvanism and faradism, the forms more especially used in medicine.

Every one is familiar with the more simple properties of the natural magnet, as to its power to attract and attach to itself iron fittings and pieces of iron, steel, etc., its power being limited by its size.

So we all know that a magnet attracts at its ends more powerfully than at any other point; and that there seems to be no power of attraction at the center, so the inference might naturally be drawn that if the magnet were cut in two, one end would possess no magnetic property; but the truth is, that all magnets are made of molecules, each molecule itself a perfect magnet; and as you increase the numbers of molecules or size of a magnet so you increase its properties as a whole in proportion to the multiplication of its molecules.

Not to dwell too long on this most simple and commonly known form of electricity, I will state the laws relating to the magnetic form, that are necessary to remember in order the better to understand the machines and apparatus used in medical applications. The ends of a magnet are named respectively north or south as they possess the property peculiar to that distinctive term. To determine which is the north or the south end of any magnet, approach one end of the magnet to the north end of the magnet needle, if it repels the needle that end is the North end, if it attracts, it is the South end. So with two magnets, if the two north or south ends are brought together they will repel; if the north end of one and the south end of another be brought in contact they will attract. There is plainly demonstated the fact, which becomes a law that like poles repel and unlike poles attract. This law applies in the treatment of diseases by electricity and must be continually borne in mind.

Another law as previously stated, the ends of the magnet attract most strongly and the centre is the mutual or equalized point where attraction and repulsion are the same, so the north or positive, and the south or negative properties counterbalance at or near the centre, determined by the shape of the magnet. This fact of the decreasing distinctive power of each end of the magnet is quite important in the successful uses of electricity; also that there is a mutual point in the magnet so also in the current. Again, soft iron is more easily magnetized and demagnetized than hard iron, steel, etc. If very soft it is made a mag-

net, or magnetized instantaneously, either by conduction or induction (to be explained later), and as promptly loses its magnetic properties, and becomes demagnetized, as the conducting or inducting influence is removed. This fact and law is utilized and is necessary in the construction of the faradic, induced, or electro-magnetic machine.

So far, the use of the magnet as a curative agent, has been found of no particular benefit; true, many experiments have been made, both in private practice and in hospitals, by eminent members of the profession, but with no satisfactory results, and of late years no attempts have been made to its adoption as a remedy of any utility, and has been discontined as with no healing virtues.

These three facts, as they are important, I will repeat in condensed form. Unlike poles attract; like repel; the central point of a magnet is the neutral point. Soft iron is instantaneously magnetized and demagnetized.

Static electricity, in general terms, means electricity set free or made manifest by friction; so any frictional electrical machine is a statical machine.

As the terms used in medical electricity originated and were adopted for the most part to supply an electric language as connected with static electricity, an explanation of such terms here will be much more appropriate than when referring to dynamic electricity.

We to refer and speak of electricity as a current, saying it flows; but we must not confound it to mean that it is a fluid as water. The term is used as the most convenient to express its motion or passage from one point to another or along a conductor; as we know it so passes, but we do not know how; we know it passes on or over the surface of metals and through fluids, yet we are ignorant of its mode of conveyance.

Conductors are those materials either solid or fluid which permit the electric current to pass comparatively free over or through them; or which offer the least resistance to its passage. Such are silver, copper, iron, all minerals and saline solutions—silver being the best conductor we have, but copper so nearly equals it, that on account of its cost as compared with silver, it is used as a substitute for the more expensive material.

Non-conductors are those which do not permit the free passage of electricity, offering great, if not absolutely perfect resistance

to its transmission; of these, glass, India rubber, resin, etc., are the best examples. Though there are no absolutely perfect non-conductors, as glass even will permit the passage, though very slowly and under great tension, yet, for all practical purposes, it is a non-conductor; so with conductors, the best offer some resistance to the free passage of the current.

Electricity passes by conduction and induction. By conduction when bodies or substances are in actual contact, the current flows from one to the other, from that most highly charged to that least charged, and conducts or conveys the same kind of electricity. Thus, if a body is charged with positive electricity it conducts positive to the other body brought in contact with it, but the latter must be insulated from the earth to retain the charge received.

By induction when bodies or materials are near to, but not in actual contact with each other. And the body receiving the charge receives a different kind of electricity. Thus a body charged with positive electricity brought near to another body capable of receiving a charge, does not pass its positive electricity, but charges the receiving body with negative electricity, and the receiving body must be connected with the earth.

By conduction the giving body loses part of its electricity. By induction the giving body does not lose any of its electricity.

A charge of electricity is applied to a storage of it upon any surface or body, thus disturbing the natural electric condition. A discharge is relieving the body or surface so charged of its storage and restoring the natural equilibrium.

The person can be charged with positive or negative electricity as one is insulated and connected with the positive or negative receiver of the static machine, and is discharged by sparks being drawn from one, or by the slowly passing off into the air of the over normal amount of fluid.

Insulation means cut off from the earth, this is accomplished by the intervention of a non-conductor, generally glass or rubber, between the body to be charged or the person to be treated and the floor of the room. A chair can be insulated or a table or bed by placing the legs in perfectly dry tumblers. Insulation, therefore, means to be so cut off from communication either direct or indirect with the earth, as to resist the free passage or escape of electricity.

Electro-motive force is the power or force that urges on the

current, consequently this force is the amount of electricity generated or developed by the electric machine or battery.

Resistance is anything that impedes the free passage of the electric current. This may be in the material of which the conductors are composed, or from some extraneous cause, as dirt, rust, corrosion, etc., as the smoother and brighter the surface over which the current has to pass, the less the resistance. Note this fact, consequently, keep all parts of your instrument clean, and the metallic portions as bright as the works they have to do will permit. A dirty electric apparatus is as much out of place and as unreliable as dirty kitchen utensils with a dirty cook would be in an otherwise clean house. Take good care of your electrical utensils.

Cavindish ascertained and demonstrated, that comparing a column of water and copper wire of similar diameters, a column of water one inch long offered as much resistance as 400,000,000 inches of wire in length; again, that water holding in solution one part of salt conducted one hundred times better than fresh water, and that a saturated solution of salt was as much better conductor to water as 720 to 1.

The resistance of the human body is estimated to be one-twentieth that of water, provided the skin (when dry is a non-conductor) be well moistened with warm water, or is about seven times that offered by the Atlantic cable.

Heat increases the resistance in metals and decreases it in fluids as a general rule.

Quantity is the amount of electricity that passes through the conductors or circuit in a given time. Now, if there were no resistance, the quantity and electro-motive force would be equal, for the amount of electricity as set free by friction or generated by chemical action would be the quantity, but there is resistance, and as the resistance is greater or less, so is the quantity modified or increased; and in recognizing this truth, Ohm established the law that goes by his name and is known as Ohm's law; that the quantity of electricity or strength of the current was equal to the electro-motive force divided by the resistance. Let Q equal quantity; E electro motive force, and R resistance, the equation would be Q E–R. Thus, I hope, is made plain, that the quantity of electricity generated (electro-motive force) is not the quantity that passes through the circuit, and becomes available in demonstration or operation. This is the general definition of quantity, but it is also applied to the amount stored in a receiver.

As that property of the magnet, termed polarity has been given; that the maximum quantity of magnetism is in one end termed the north or positive pole, and the minimum quantity in the other end, the south or negative pole. I shall now endeavor to make plain what is understood by positive (X) and negative (—) electricity. When reference is made to positive or negative electricity or to that manifestation of it designated by these terms, as also by the sign (X) plus and (—) minus, we mean that it is positive (X) or negative (—) as relating to the earth. The earth being considered O—; or that the electric equilibrium of the body is disturbed and that its electrical condition is either above X or below — its normal condition.

If this normal condition is disturbed in any manner, by influences either mechanical or natural, such body so disturbed will be either positive X or negative —. Positive as its electricity may have been increased, or negative as it may have been diminished. Again, if it is charged to its full capacity it has its maximum or greatest X amount; if its natural condition has been reduced to the lowest point; it is said to be at its greatest — amount. So the law of attraction and repulsion seems plain. If two bodies are charged to similar or equal positive conditions, no electricity can pass between the two; and by a law peculiar to electrcity, they actually are repellant; the same if both are alike as to their negative electrical conditions, but let there be a difference of any kind as to electrical condition, and there is an effort at once to restore an equilibrium, and that is accomplished in an instant, that overcharged with positive will give off its surplus by conduction to the one not charged so highly or that may be in a negative condition; so the one that is in the greatest negative condition will attract the positive electricity from the other that may not be so negative or may be natural or charged with positive electricity, until each possesses an equal quantity of both positive and negative, or as it were restored or brought to the same electric level.

This law of attraction and repulsion applies not to magnetic and static electricity only, but also to dynamic. The positive pole attracts to itself negative electricity and repels positive; it may be more plainly expressed, probably, by saying that the positive drives or pushes ahead of it positive and allows the negative to unite with or pass by it, as the natural tendency of the two kinds of fluid is to move in opposite directions. In like manner the negative acts towards positive electricity.

This fact confuses many, because they do not accept the law without being able to understand the reason. I can simply say, like many of the facts in nature, we must accept them when shown to be facts, even though we cannot solve the hidden cause nor comprehend the unknown, so I will add one more explanation, the accepted theory of electrical transmission is every conductor of electricity, as a body, is composed of electric molecules; do not confound this with physical molecules; each molecule has a positive X and negative — atom. In the dynamic current the theory is, that electricity (force) is transmitted from molecule to molecule, by the positive electricity, of say molecule No. 1, being set free and uniting with the negative of the molecule, No. 2, immediately preceding it, and as two positives cannot occupy the same space in the same time, (that is in the same molecule) the P of the second molecule is displaced, and unites itself with the negative of the next preceding molecule, No. 3, forming a new combination, and so on from molecule to molecule of the whole series throughout the circuit, etc. This changefrom molecule to molecule and movement of atoms is instantaneous over good conductors. So, by this interchange and reunion of atoms, the first positive electric atom finally reaches through the whole series of molecules to the negative pole or plate of the battery and the negative in inverse order to the positive pole or plate. There is consequently a current passing each way, or a transmission of electric force in two different directions, over the same conductor or through the same body or fluid, as positive X and negative —. Yet, for convenience and simplicity we speak of the direction and motion of one only, the positive, because its manifestations seem more marked and is an increased electrical condition, and tends much less to con-

Positive X electricity then means that above the electric level fuse the mind than to consider them separately.
of the earth, or that which, it accumulated, raises the body above the earth's or its normal electric level.

Negative —, that below, or which decreases the condition of the body below the earth's or the normal electric level.

AN Englishman who insulated his bedstead by placing underneath each post a broken off bottom of a glass bottle, says that he had not been free from rheumatic gout for fifteen years, and that he began to improve immediately after the application of the insulators. A local paper quoting the item, wisely adds: "There's many a fellow who could cure his gout if he would break off the bottom of his glass bottles in time."

POST-PARTUM ATONY AND SUBINVOLUTION OF UTERUS.

Written for the Texas Eclectic Medical Association,

BY E. CARMICHAEL ROTHROCK, M. D., ATHENS, TEX.

For years we have noticed certain abnormal conditions occurring in some cases after parturition, which, of course, are known, but yet have not received that attention that the gravity and importance of such a condition should demand. Having had two such cases in the last six months—one of them a protracted and troublesome case—we will give a general outline of such troubles. Every physician knows that it is of great importance to secure uterine contractions immediately after delivery, if they are not present. At a later stage the condition of the uterus receives little or no attention. The first six or eight days the organ should be felt through the abdominal walls as a firm, hard ball; but frequently the contraction of the organ has not occurred, or at least to a very small extent, and is discovered to be soft, compressible, and, in some cases, as large as before delivery, and can hardly be defined from its surrounding tissues and muscles. In some cases this condition may be temporary, and the contractions may correct this condition by after-pains being present; but seldom does these intermittent contractions do much good in such cases, which we term Post-partum Atony and Subinvolution, in which after-pains and contractions are entirely absent, there may be pain but no true after-pains. It is, perhaps, needless to state the importance of firm tonic uterine contractions, not only immediately after delivery but during the process of involution of the uterus, thereby securing exemption from hemorrhage by closure of the enlarged uterine blood vessels, and prevention of the formation of thrombus, and reduction in size of the organ, which should take place a few weeks after delivery. But in atony of the uterus the muscular structure does not perform its task sufficiently to close the uterine vessels, and if the organ is unduly enlarged, then we have a twofold factor operating; the os is generally in such a condition, dilated sufficiently to admit air, which acting upon contained clots, decomposition takes place, producing septicema by resorption or formation of thrombus, more or less, according to condition existing, resulting in untoward consequences. In process of delivery, atony of the uterus frequently plays a very important part, and after the removal of the placenta there is a great tendency to relaxation, which will frequently per-

sist in spite of all measures used to overcome that condition, caused, no doubt, by nervous irritation, sudden shocks, excess of liquor amnii, improper interference with instruments, administration of anæsthetics, and ergot, at improper time, etc. Gases contained and generated within the organ will continue to increase the size unless they are expelled by pressure—firm contactions. The only safety, then, to prevent those grave symptoms is to procure firm contractions. It is imperative that contractions of the organ should be secured for days after delivery, without which there can be no bounds to the absorption of infectious materials. Frequently, when the patient appears to be doing well, from the third to the eighth day, and sometimes later, there will be a gradual elevation of temperature—it may be mistaken, in the first few days, for "milk fever," but is not in such cases—of moderate intensity, increasing in the evening; pulse increased, but nothing like it attains when septic infections are manifested; there may be a chill or a slight cold spell, or it may be absent. The lochia still retains their sanguineous color, and, in some cases, amounts to a condition of hemorrhage. The uterine is soft, flabby, and, upon examination, the pelvis is found filled with the yielding organ and complete atony of the uterus—this and nothing more.

What, then, is the cause of this morbid phenomena? From observation, we conclude that, for want of proper contractility of the uterus to close the enlarged uterine vessels, with the collateral vessels contained within, the pelvis being subjected to pressure, as for instance, defecation, getting up of the patient, or by action of ergot, etc., disintegration takes place and destruction of the thrombus and expulsion, giving rise to the dark appearance of the lochia: but enough remains of the decomposing material to be reabsorbed and manifest itself by fever. Again, cases do occur which are not so mild, but present violent symptoms from the first, or about the fifth or seventh day; a chill followed with slight fever, which gradually increases until we have a grave affection to contend with; the pulse is 110 to 130, weak and small; sometimes hemorrhage, rise in temperature—100 to 101°; abdominal tympanitis from accumulation of gas; bowels generally constipated; tongue slightly coated white, sometimes brown, tip and sides red; countenance anxious; failure of appetite. Retention of portion of placenta or membrane will cause such symptoms, the removal of which will be followed by relief; but aside

from such cases, we have examined for a cause by exploring the uterus, but have failed to find a cause by this method. In most cases, the respiration and circulation were embarrassed, some recovered soon, and others convalescence was slow and protracted, the symptoms manifested pointed beyond doubt to thrombus, and in some cases—one we had this spring—embolism, respiration and circulation being involved to a great extent in the abnormal condition. None of our cases have proved fatal, fortunately; but, if not checked, it will degenerate into puerperal fever, of which it may be (a severe type) the initial stage. The difference in this disorder and puerperal fever is the greater intensity of the symptoms in the latter—pulse generally 110 to 164–5; temperature 102 to 104, and even 106° in the worst cases of puerperal fever. Lochia, as a rule, ceases; milk suppressed, etc.

So, from the above, there is a vast difference. If allowed to continue and become aggravated it would, perhaps, come under the term of pyæmic form of puerperal fever. Those morbid conditions existing are fruitful of other serious complaints: uterine displacements, retroflexion, and versuri, etc., which frequently take place weeks after confinement for want of firm contractions—atony of the uterus.

How shall we treat such patients? We must prevent this condition by giving the strictest attention; yea, from the first maintain firm contraction of the uterus, if we would avoid these untoward consequences, by administration of ergot, ustilago maidis, cimicifuga race, caulophyllum—one or the other, as seems best, and by use of pressure with binders (which should always be used) immediately upon extraction of placenta (which should be accomplished from five to thirty minutes.) When thrombus has taken place, and sepsis is present, then we have to treat on general principles. Carthartics will be needed, and the use of uterine injections are indispensable; carbolic acid, permanganate potash, fluid hydrastis, glycerine, listerine, etc.; and other measures to meet general pathological conditions. Therefore, an early attention to these rules, a firm contraction of the uterus, with hygiene measures in each case, we will, beyond doubt, avoid to a great extent those serious morbid conditions produced frequently by post-partrum atony, and subinvolution of the uterus.

ERGOT IN HICCOUGH.—Drachm doses of ergot repeated is said to cure obstinate hiccough.

COMMENTS ON SOME CASES IN PRACTICE.

BY V. A. BAKER, M.D., ADRIAN, MICH.

Eighteen months since an unmarried lady, twenty-two years of age, advised with me regarding her condition, she being pregnant at the time and having been operated on by a doctor who had attempted to rupture the membranes enveloping fœtal life, without success. Three hours after the operation she was taken with violent pain and hemorrhage, and much alarmed, sent for the nearest physician, to whom she also confided her condition, and who assured her she would get away from her trouble in a short time.

After the violent pain, which lasted the best portion of a night, had subsided, she was able to be about her room, though intensely tender through the abdominal region, which condition lasted some three or four weeks, accompanied with fever and pain at intervals, with, also, a bloody, mucous discharge. Scarcely able to be about, her condition alarmed her friends where she was residing at the time, and she was sent home by rail, a distance of more than two hundred miles. Such, in brief, is the history of her case as confided to me. I made a careful digital examination, finding the os uteri patulous and tender and smeared with a bloody mucus with an offensive odor. The abdominal parts were exceedingly tender, a low grade of peritonitis being apparently present. Urination was frequent and painful; bowels constipated; apetite poor; pulse 100, thread-like. Diagnosis in doubt. The fact that she had only passed over her *first period five days after the presumed "catch,"* considered with the above symptoms, led me to doubt her having been pregnant at all, but the sequel proved quite different. The girl insisted she was pregnant. "I know it," she would say, "by my feelings," though she never had had experience of the kind before.

And just here, though it be a digression from my subject, I desire to state that I believe with the majority of women, pregnant, even for the first time, they are able to give a correct opinion—an intuitive experience, no doubt. I advised quiet and waiting for developments. The case went on much the same as related herein until the third period was due, when a *normal "show,"* sufficient to constitute a "period," occurred. I say normal, because it was so related to me. Immediately after this she was much better, able to visit me at my office, ride,

walk, etc., and so remaining until the fourth month, when she was taken with violent convulsive pain, *without show*, until the use of a hot bath developed a slight, pale discharge, accompanied with relief from pain for the time. After keeping her bed for a week she had a partial return to her late condition of health and was again able to ride and be out much in the open air; fair appetite and digestion, though inclined to constipation and depuria. She at four and one-half months complained of vertigo, which became quite troublesome. Another examination was made, both digital and by the aid of speculum, finding the uterine os much as before, except the anterior lip was swollen and indurated, but not sensitive. The anxiety of the patient was so great and her symptoms so obscure, that consultation was held, and all her symptoms, with history, carefully considered. The young lady was told our belief was she was *not* pregnant. She was still unconvinced, and, as I learned after, consulted a gynecologist of some local note, who, learning her history, gave as his opinion that she had metro-peritonitis from injury received at the time of operation to procure abortion. The urine had been examined with negative results; a uterine sound carefully introduced revealed no secrets, no beating of a fœtal heart could be detected, nor did she feel any indications of life by motion. Meantime, the treatment for her betterment had been all that to me was suggested as of possible benefit. I now lost sight of the case for a month and a half, because, as the patient stated, she "felt so smart." Six months and over had now elapsed since her misfortune and showed no difference in her form; menstruated apparently regular at five months, and also at six. "I think I will give it up," she naively remarked, "that you doctors know more than I do about such matters," though she added, "I feel sometimes as though I was wrong inside someway." Thus matters continued for nearly two months longer; menstruation regular at fifth, sixth, 7th and 8th months; three days after which last menstruation ceased, she was taken again in convulsions, so thoroughly alarming her friends that I was summoned, arriving at her bedside two hours after she was first convulsed. I found her rigid, unconscious, pulse full, extremities cold. Passing my hand over abdomen, I was suprised to find her full and tense in that region. I immediately administered a hypodermic injection of morphia, gr. ⅛; sulphate of atropia, gr. 1-100, and proceeded to examine *per vag.*, and to my astonishment found presenting

through the well dilated os a *child's head*, which I immediately proceeded to deliver instrumentally, said head being followed by a full-grown child, weight eight and five-tenth pounds. The child lived, or breathed at least, twelve or fifteen hours. The mother rallied immediately, convalesced in good order, the ending, as I think, of an unusually obscure case.

In a subsequent conversation with this patient, which for two months preceding her confinement I had not seen, she stated that she felt no motion at any time. Seemed some bloated as she expressed it, all, seemingly, going down at night. About a year has elapsed since the ending of this hastily described case, her general health remaining poor, induced by reflex uterine irritability kept up, in my opinion, by injury received by the unsuccessful attempt to produce abortion.

CATARRHAL FEVER.

BY R. M. AUTEN, M.D., ELLIJAY, GA.

This disease has been prevailing in an epidemic form throughout this section. It has all the premonitory symptoms of measles—the eyes and nose running water, accompanied with sneezing, a dry, harsh cough with but little expectoration; sometimes cold and then hot; no regular chill or fever, but, as some of the patients term it, "rather mixed;" temperature about 100—but little the more at any time; pulse ranging from 95 to 100, rather full; tongue coated, generally with a brown fur with red edges, somewhat elongated; no appetite; complain of aching all over; vision somewhat clouded. About the second day the muscles become very sore. Sometimes they are unable to turn themselves in bed. During the entire duration respiration is very little disturbed, except just after a severe paroxysm of coughing. The treatment that I have found most successful in this trouble is, podophyllin, 1/8 gr; euonymin, 1/4 gr; mur. ammo., 1 gr; composition powders, iij grs, every 3 hours, with a thorough washing off and hard rubbing with a coarse towel every day. With the above treatment I have invariably been successful. The disease will yield in from 3 to 5 days. I have not found any case where the lungs were at all involved. The irritation was confined to the bronchi, and would frequently reach the bifurcation, but no farther. The Allopaths call it pneumonia, and with their calomel and blisters accordingly let one of their patients visit the "happy hunting ground."

Next in importance to man comes the horse. As there is but little said in medical journals regarding the horse, the country doctor's best friend, I think it will not be out of place to give some hints in regard to the care of the horse; also some recipes for some of the diseases the horse is most subject to. The horse should be kept in a clean, dry stable, sufficiently ventilated and well lighted, as it injures his sight to be kept long in a dark stable. As the doctor's horse has to stand up all the time when not in service, he should have his feed and water regular. Always water before feeding, never water just after feeding, as the water carries off the food without its being digested. He should have salt two or three times a week, and at least once a week give a teaspoonful of bi-carbonate of soda with his salt. By so doing he will be less subject to disease, and his food will digest better. Always curry and rub twice daily. When your horse takes distemper give him shelled oats and wheat bran mixed with water and a little salt in each feed, and twice a week give soda. If he has to be exposed to mud or rain rub him good and dry before stabling him. For pin worms dissolve an oz. soc. aloes in warm water and inject with an 8 oz. pewter syringe. The evidence of pin worms is the horse rubbing the root of his tail. For colic give him ½ lb. Epsom salts, 2 ozs. bi-carb. soda, 1 oz. 3d preparation of lobelia. Dissolve the salts and soda in water, then add the lobelia and give at once and let him rest. For botts take a pint of molasses with just enough water to dilute and add 1 oz. of officinal tr. of opii. and give at once. Wait a half hour, then give a pound of Glauber's salts, and all is well.

HYDROCELE—A CASE.

BY J. W. PRUITT, M.D., RUSSELLVILLE, ARK.

About the 8th of last month I was consulted by Mr. B—— of this place for a swelling of the scrotum. He had consulted and been treated by two other physicians, one an Eclectic, the other an Allopath. The former pronounced the trouble orchitis, and proceeded to bandage, with such pain as a result that it had to be discontinued. The other physician diagnosed the disease "indurated testicle," and applied iodine, without benefit, of course. The case then fell into my hands. I at once pronounced it hydrocele, greatly to the surprise of the other two M. Ds., one of whom (the Allopath) told the patient he'd give

one thousand dollars for every drop of water that could be got out of it.

I had the patient visit my office at night, and placing a lamp behind him, I stood in front, when the tumor presented itself translucent, with a dark spot—the testicle—high up. Taking a hypodermic syringe I plunged in the middle and drew off the instrument full of straw-colored matter. I sent the patient home, telling him I would operate the next day, but when I visited him next morning and found that the sack had almost completely emptied itself during the night into the cellular tissue through the puncture made in the tunica vaginalis with the syringe, I concluded to wait till the sack began to refill before resorting to means to effect a radical cure. In about a week or ten days injected tr. thuja, ʒij; water, ʒij, through the hypodermic needle, but the tr. being a home-made affair, or else the injection not reaching the sack, it failed to excite the requisite amount of inflammation.

After waiting some ten days longer and the sack beginning to fill again, I drew off the fluid—three and one-half ounces—with an exploring needle, and injected through the needle, with a glass P. P. syringe, specifiic tr. thuja—Lloyd Bros—water aa, about ʒjss. I worked the fluid about through the sack, and fearing another failure, left it in. It gave considerable pain. Here I feel sure I overshot the mark, as in a day or two my patient had a splendid case of orchitis, which, under the use of arnica locally, anodynes, bromide and iodide of pot. and strapping, subsided in about two weeks, and my patient is now well and at work.

To Prof. Howe, of Cincinnati, belongs the credit of first using ing and calling attention to thuja in this disease. Had I another case to treat I should first, after emptying the sack, inject one or two drams of a ten per cent. solution of cocaine, letting it remain three or four minutes, working it about in the sack, then draw it off and inject thuja, spec. tr. water, aa, one or two drams, let it remain five or six minutes, working it all through the sack, then draw it off. By this method I think pain would be reduced to a minimum, and any excess of inflammation avoided.

I hope others will give this treatment a trial and report through the JOURNAL.

ANTI-RHEUMATIC MIXTURE.—℞. Potass. iodi, ʒ ij; vin. colchi sem; syr simplicis, aa ℥ ss; auq. menth. pip., ℥ v. M. Sig. Tablespoonful at a dose.—*Ex.*

ANTIPYRINE.

BY F. W. OWENS, M.D., LAMASCO, TEXAS.

In the October number of your Journal is an abstract from Dr. Abbott, of Minneappolis, Minn., on antipyrine. After reading his article I immediately procured a sufficient supply of this new drug to test in practice. Wishing to test its merits as a therapeutic agent I only gave it in "bad cases," whether pneumonia, catarrhal or congestive.

After using it for the past four months in quite a number of cases I think I can safely say the drug is what Dr. A. claims for it, and even more. Given (in full doses) to patients suffering from high fevers it reduces the temperature, relieves pain, the skin becomes moist and the patient is apt to go off into a natural sleep (if not disturbed by the friends) and the patient is soon in a condition to take quinine &c.

I was called hastily one night (in the latter part of January, '86,) to a two year old child of Mr. L. When I arrived at Mr. L.'s he informed me that he had no hope of my giving the child any permanent relief, as the child had just gotten up from a severe spell of sickness. Upon examination I found the child suffering from congestion of the lungs. Difficult respiration, temperature very high, pulse small but rapid, skin dry and hot. Child unconscious and would onlh moan when disturbed. The accessory muscles of the chest seemed called into action to assist in carrying on respiration, and everything indicating incomplete oxygenation. Unless some active treatment was given carbonic acid poison must soon come on. Ordered large mustard draft to the chest, gave full dose of antipyrine (about 3 grains). In one hour gave another 3 grain dose of antipyrine. Twenty minutes after second dose the child became conscious, the skin moist, pulse full and not so fast, and soon went into a quiet, natural sleep. The mustard plaster had not reddened the skin yet, but soon aroused the child from its sleep, as it began to burn when the congestion was relieved. The house was crowded with friends, and the old ladies began to inquire of each other, "was that quinine or morphine the doctor gave?" The child was soon taking quinine, and was up on the fourth day.

About the time this child recovered I was called to Mrs. H., a middle-aged lady, married, who had contracted a severe pneumonia a few days before and had had the usual treatment—special

sedatives, asclepias, &c. The great trouble seemed to be a se_ vere neuralgic pain near the heart, which had resisted all remedies heretofore employed. As the temperature was elevated considerably I gave one full dose of antipyrine (about 15 grs). In 20 minutes the lady was perspiring freely and went to sleep the first time for several nights, the pain all gone and did not return until the patient was able to be up. One of the friends inquired if that powder was a preparation of mercury.

As far as my experience goes with this drug I can say that it gives better satisfaction in high fevers (to both patient and doctor) than any febrifuge I ever employed. It is worthy a place in every physician's medical case. Try it, Eclectics, and report through the JOURNAL.

EXTRACT OF BEEF.

BY W. H. HALBERT.

Take a piece of raw beef, fresh, one inch thick, three inches wide, four or more inches long; place it on a hot broiler, let it remain until hot one-half through, turn and heat the other half. Get the meat hot through, squeeze the juice out of it with a lemon squeezer, salt and pepper to suit the patient's taste. Give one tablespoonful of this liquid every three or four hours, or as much as can well be digested. I rarely find a patient who does not take this and pronounce it quite palatable. Give this for the same conditions for which you would give beef tea. This is much more nourishing, and very much better relished by the sick than beef tea.

LIQUID HYDRASTIS—COLORLESS.

BY W. H. HALBERT.

A good colorless extract of hydrastis canadensis can be made by the following formula: R. Pow. hydrastis can., ʒ2 ; boiling water, ℥4; acid muriatic, *m.* 20. M. When cool filter and it is ready for use. This is not irritating to mucous membranes, not nauseating, and can be used one drachm to one ounce, to three or four ounces of water, and with other medicines if desired. I have been making and using the above extract for several years, and it is much better than the black or dark colored preparations in use. This extract will keep for several weeks.

COMMENTS.

BY J. E. LAYTON, M.D., PERRYVILLE, MO.

It is now seldom that I ever contribute in way of writing for any medical journal, as I have long since learned that those who write most, should, as a rule, write the least; and since 1879, when I so bitterly opposed the metric system and thus made myself a mark for so many to fire squibbs at, through the medical journals then, that I said, let others write. To see the great change that has come over the vast number of physicians regarding this same metric system, is even surprising to myself. In most any of the medical literature of to-day you can read a condemnation of this metric system, but not until after many a victim has been sacrificed to this foolish idea that such a system would look more fashionable, etc. But now the physicians of to-day are going wild in another path equally as condemnable, and it is that of lending their names and aid by patronage, of advertisers, who claim they have by a special way prepared a compound warranted to be better than the doctor in person could prepare it himself, and to make it seem palpable, gives the contents (i. e., the formula) except *the aromatics* of the compound, or the mode of preparing, all of which is known only to the great *Chemical Company*, who prepares the same, making it, in my estimation, little better than a patent medicine, especially when this chemical company consists, which I am cognisant of the fact in two instances, of one man; he being the proprietor, the company, etc.

Physicians are asked to test these preparations and give their assent to their efficacy, and it is unfortunate that many do so. Who ever heard of a physician recommending Ayer's Sarsaparilla, Bull's Cough Syrup, etc.? but it would look no less absurd, as there are now flooding this country no less than five hundred mixtures, half of which is only calculated upon trial to end in disappointment to the physician who uses them. The failures are never heard of, for should I now give the names of such as have failed in their action as represented, would it be published? Not by any means. Thus the physicians are kept in the dark. That some of them are made by reliable chemists, is all true, but too many such are now being thrown upon the market with the request that physicians report favorable of them only that the same may be used as a means to load the said

chemical company's pocket without his putting forth any great endeavors. I do believe in giving great encouragement to chemical laboratories that endeavor to obtain pure extracts from fresh drugs or plants; but I will never patronize a house that puts out any compound or mixture known in part only by those who are to use the same, and it is the only way to stop this species of patent medicine manufacturing.

SULPHATE OF QUININE.

BY FRANCIS ANSON EVANS, M.D., GRANDVIEW, INDIANA.

There certainly is a diversity of opinion entertained in regard to the action of quinine upon the system. Just what organ it has affinity for, or directly affects, has escaped the observation of most observers. It is claimed to have anti-pyretic qualities, but its *modus operandi* in producing, or, rather, in lessening pyresis, is wholly enigmatical. It is said to be tonic, stimulant, sedative, antiperiodic and what not, but just where it is specially indicated is a mystery. There is also a difference of opinion in regard to the pathological condition in which its curative qualities are most manifest. Some claiming that it should be exhibited right along regardless of the state of the temperature, others administer it more cautiously during the remission only. Furthermore, the question of dosage is controverted. Some claim that "immense doses, pushed boldly" is the idea (from ten to fifteen grains), others claim better "luck" in 2 to 3 grains, or even ½ to ⅛ grain doses. It has been the "cure" for chills, with a class, in all conditions, positions, transitions. But just how, when, and where it slew the vibrois would be the height of folly to speculate. Yet all this speculation in medicating is claimed as *science*. Legislatures are appealed to in behalf of "science."

But does quinine have curative qualities? Doubtless. When the pulse is soft and slow, skin moist and tongue clean, one might hopefully venture a grain or two of quinine. When the symptoms are so obscure, or the physician so reckless or ignorant as not to note those present, or when he does not, or cannot, in the great sea of his ignorance, find what else to give, then, to assist humanity in her travail, and (aside) to assist the undertaker also, he might exhibit quinine in "immense doses, pushed to boldness."

ABSTRACTS.

THE BACTERIA OF DISEASE.—Henry Hunn, M.D., Albany, Professor of Diseases of the Nervous System, Albany Medical College, read this paper before the Medical Society of the County of Albany, February 10, 1886:

So much has been said and written during the past few years about bacteria and about their relationship to disease that it must be a matter of interest to every physician to see these little organisms which are daily becoming of greater and greater importance in pathology.

The conditions requisite for the life and development of bacteria are (1) warmth; (2) water; (3) oxygen, either free or in combination; and (4) a sufficient quantity of organic matter to serve as food. When all these conditions are fulfilled, the bacteria develop with great rapidity until they have exhausted their supply of food; that is, until they have converted the complex organic molecules either into inorganic molecules or into simpler organic molecules, according as there is an abundant or an insufficient supply of oxygen present. When the organic matter is in solution, and when air or oxygen is artificially supplied to this solution in such abundance that there is always free oxygen present, then the bacteria convert the organic matter into carbonic acid, water and ammonia directly, without the production of any evil compounds. When, however, the supply of oxygen is limited, as is always the case in nature, then in the decomposition of the organic matter through the agency of bacterial life certain bad smelling compounds, such as sulphuretted hydrogen, etc., are formed, and the process is called putrefaction. From numerous experiments it appears that all putrefaction is directly caused by bacterial life. All the dead organic matter in the world, except what is burned and what is consumed by animals as food, is converted back into inorganic matter by means of putrefaction. Were it not for the bacteria, the dead organic matter would remain in the world unchanged; and, although organic matters sometimes putrefy sooner than is desired, yet, in general, the bacteria perform a very useful and necessary work in removing the dead organic matter from the world and returning it to the inorganic kingdom. They are the great scavengers of nature.

Whenever any of these pathologenic bacteria enter into the body, they absorb their food and oxygen from the tissues, and grow and multiply. If this growth and multiplication were unchecked, they would consume all the tissues and soon cause the death of the animal. The animal system possesses the power of acting upon the bacteria and destroying them more or less completely, and as a result of this action a complex of symptoms is produced which is called disease. The essence of many forms of disease consists in a struggle for existence between the bacteria and the animal tissues. In the case of the simplest animals this struggle can be obs. rved under the microscope. The simplest form of animal life is the amœba, which is altogether similar to the lymph corpuscles of animals, and when a little lymph from a frog is placed together with a few bacilli of anthrax on a warm stage and observed under the microscope, some very noteworthy phenomena take place, which have been described by Prof. Metschinkoff, of Odessa.

It appears that the lymph corpuscles possess not only the power of taking the bacteria into their interior, but also of causing them to disappear. Metschinkoff shows how this disappearance or destruction of the bacteria within the corpuscle is accomplished—the bacilli either break up into small fragments or granules, or else their outlines become more and more indistinct till they disappear. In this way the lymph cells destroy the bacilli. In other cases the bacilli destroy the lymph cell, causing it to burst and disappear. By further researches Prof. Metschinkoff finds that the bacilli are not destroyed by the fluids in the tissues, but only by the white corpuscles, and it appears that when a white corpuscle has eaten one or more bacilli it thereby becomes changed so that thereafter it is able to destroy the bacilli more easily. Finally, Metschinkoff finds that at certain temperatures the white corpuscles act more strongly and the bacilli less strongly, so that the latter are destroyed by the former, while at other temperatures the reverse in the case. From these experiments it would appear that there is a mutual antagonism between the lymph cells, or white blood corpuscles, on the one hand and the bacteria on the other, and that when the latter enter into the human body the former tend to destroy them.

Another set of experiments by Strauss definitely prove what has long been a matter of doubt, that chemical irritants, such as turpentine, croton oil, etc., cannot produce suppuration without

the presence of bacteria. In the light of these two sets of experiments, (first, that without the presence of bacteria, pus is never formed, and, second, that the pus cells, or white corpuscles, can destroy the bacteria), we are able to understand a little more clearly the meaning of some of the phenomena of septicæmia in the broadest sense of the word.

When the fresh surface of a wound is free from all septic bacteria, the wound heals quickly without suppuration or constitutional disturbance. When, on the other hand, septic bacteria are present on the surface of a wound, then the wound does not heal quickly, and suppuration and other symptoms of disease appear. Pus is poured out on the surfaces of the wound and prevents their uniting, and, although this formation delays the healing of the wound, yet it is of great value in the preservation of the well-being and the life of the individual, and is really curative in its nature. It is the only barrier which can be thrown out against the general infection of the body. The pus cells are the only elements which can destroy the bacteria. If these latter are few in number, they are quickly destroyed by the cells, little or no destruction or decomposition of tissus is produced, the flow of pus ceases, and the wound heals. If, on the other hand, the bacteria are in great abundance, they grow and multiply, and not only destroy many of the cells and the tissues, but in so doing produce decomposition and putrefaction, so that the pus and discharge from the wound has a very unpleasant odor. In such a case many of the bacteria pass beyond the barrier of cells poured out to destroy them, and, entering the lymph channels, reach the nearest lymphatic glands. Here the same process is repeated. There is a curative hyperplasia of the glands; that is, there is within the glands an increase in the lymph cells, which may destroy the bacteria, so that with the hyperplasia of the lymph glands the disease may terminate. In severer cases, however, the bacteria are so numerous or so virulent that they pass beyond the lymph glands and enter the general circulation. Then appears a remarkable symptom which is called fever, and which consists essentially in an increase in the heat of the body.

The fever which is produced by the entrance of bacteria into the blood causes much discomfort, and is at times dangerous to life, and yet, in all probability, it fulfills a most useful purpose.

The cacillus anthracis has its greatest activity and produces spores only between the temperatures of 64½° and 107½° F.

Pasteur claims that anthrax cannot be inoculated in a fowl, because its normal temperature (106½°) is too high for the life and growth of the bacillus, but when the normal temperature of the fowl is lowered by immersing its legs in cold water, then it can be inoculated with the bacillus successfully. The bacillus tuberculosis can be cultivated only between the temperatures of 86° and 106° F. The spirilla of relapsing fever are rendered motionless in a very few hours by a temperature of 104° F., and it is probable that a temperature of 103° to 106° F. will weaken all the bacteria of diseases so greatly that they are readily destroyed by the white corpuscles of the blood, while at the normal temperature of the body the bacteria might destroy the white corpuscles. It seems, therefore, altogether probable that the fever of septicæmia, as well as every other form of fever, is curative in its nature, in the same way that the suppuration and the hyperplasia of the lymph glands are curative.

In cases of septic poisoning the system reacts against the pathogenic bacteria by suppuration, hyperplasia of the lymphatic glands and fever. These are the three great symptoms of septic poisoning, and they are all curative in their nature. The treatment of any case, therefore, should be directed, not against the symptoms, but should be calculated to weaken the vitality of the bacteria and increase that of the white corpuscles.

In a manner quite similar to that described for septicæmia, almost all the other pathogenic bacteria, when introduced into the system, produce at first a local inflammation, then a hyperplasia of the neighboring lymphatic glands, and finally fever. Each of the symptoms cause discomfort, and each may become so excessive as to destroy the life of the patient; yet in their essential nature they are curative, and our therapeutic efforts should be directed, if possible, against the cause of the disease and towards maintaining the patient, while an attempt should be made to modify the symptoms of disease only when they are manifestly excessive.

In the light of our present knowledge, it seems to me that we can hardly attach too much importance to the following sentence with which, in the middle of the seventeenth century, Sydenham commenced his medical essays: "A disease, in my opinion, how prejudicial soever its causes may be to the body, is no more than a vigorous effort of nature to throw off the morbific matter, and thus recover the patient."—*Albany Medical Annals.*

ALETRIS CORDIAL.—A professional friend asks my opinion of aletris farinosa—unicorn root. As a tonic for the stomach, I have used the Aletris (in the form of a tincture, and also with aromatics, in form of Aletris Cordial, as prepared by the Rio Chemical Co.) with uniform success. It powerfully improves digestion, and restores a lost appetite. But there is one other property that it possesses, and that is its effects upon the assimilating functions, thereby improving blood-making, etc. There are but few remedies of equal therapeutical value in depraved digestion and feeble assimilation. Even in that peculiar morbid condition of digestion and assimilation that leads to diabetes, it has in my hands, aided very much in a final cure. I have often alternated it with iron, in extreme cases of anæmia, with the most successful results. Its most marked properties consist in the specific tonic influence it exerts upon the female generative organs, imparting tone to the uterus, thereby not only promoting the healthy functional activity of it, but also preventing that morbid condition that leads to miscarriage in gestation; and also promoting the menstrual function when, from debility or anæmia, it has been suspended. When once females abort or miscarry, then there is often a habit formed, in which, if the Aletris Cordial be given regularly up to the regular termination of the term of gestation, it will generally prevent such an accident. It is very valuable in dysmenorrhœa. It often is sufficient of itself to cure leucorrhœa, provided its use be continued long enough. It is strictly a female tonic.

In sterility, from an atonic state of the ovaries, this is one of our most direct and trustworthy remedies, given in doses of 30 to 60 drops three times a day, for several consecutive months. In all cases of uterine atony, not only where it leads to suspension of the menses, but where it is the cause of sterility, prolapsus, ante or retro-version, this is the proper remedy. Since testing this remedy thoroughly in malpositions of the uterus, I have almost dispensed with the pessary or the uterine supporters, so much in use. I have used it in a great number of cases of what is called habitual abortion, and with uniform success. Its intense bitterness has been one very great objection to it, but that is now obviated by the use of the Aletris Cordial, as prepared by the Rio Chemical Co., St. Louis, Mo. I use the Aletris Cordial a great deal, but the more I use it the better I like it—it is the female tonic par excellence. I. J. M. Goss. M. D., Marietta, Georgia.

LIVE STOCK FOR THE SOUTH.—Experience has shown that certain breeds of domestic animals succeed admirably in the South, and become acclimated without difficulty. The Jersey, Ayrshire and Devon, among cattle; the Southdown, Merino and Scotch Cheviot, among sheep; the Berkshire swine, and the Hambletonian Morgan strains of horses, all do well there, and serve their purposes in the best manner. The Jersey has been brought into the South in large numbers, and has been found as hardy, and as valuable for the dairy, as in any other locality. The native Southern cows mix well with this breed, and as dairying is bound to become a prominent interst in the South very soon, it is probable that the number of Jerseys will largely increase. State Jersey Associations are forming, and local herd-books for each State will soon be the rule. Ayrshires are also popular for dairy purposes, and for ranging for beef, as they will stand exposure in the woods all the winter, make good steers for working, and very fair beef cattle. The Devons, however, will supplant them before long, because of their excellence for the yoke and the butcher, excepting for especial dairy purposes, when the Jersey and Ayrshires will probably divide the field between them.

As regards sheep, the main purpose is at present wool, but before long, mutton will become valuable, and the markets for this meat are close at hand. The prevailing hog and hominy, is bound to give way before the steadily advancing culture of the popular taste, which is a conspicious feature in the South, and home grown mutton is fast taking the place of Western pork. Probably the Southdown, the Shropshire, and the Cheviot, which are already introduced, and are popular, will supply all the needs of the South in this respect, and the Merino will head the flocks which are kept for wool alone, in the wire-grass pastures of the piny woods region. When the native "land pike" hog has had its day, the improved Berkshire will take its place. It is now already extremely popular, and fattens well on the prevalent mast in the forests.—*American Agriculturist for March.*

"PROVIDENCE IS ON THE SIDE OF THE STRONGEST BATTALIONS" From General Buell's "Shiloh Reviewed" in the March Century we quote as follows: "Nowhere in history is the profane idea that in a fair field fight, Providence is on the side of the strongest battalions, more uniformly sustained than in our Civil War. It presents no example of the triumph of 15,000 or even 20,000

men against 25,000. It affords some such instances where the stronger force was surprised by rapid and unexpected movements, and still others where it was directed with a want of skill against chosen positions strengthened by the art of defense; but nowhere else. The weaker force is uniformly defeated or compelled to retire."

A COURAGEOUS WOMAN.—A remarkable example of the impunity with which Cæsarean section can be performed is quoted as follows by the Medical News: The following almost incredible history is communicated by Dr. Guggenburg, of Meran. Some years since he was called to a woman, thirty-seven years of age, who was taken in labor with her eighth child. After suffering great and ineffective pains for two or three days, the woman, believing herself on the point of death, took a razor and ripped open her own abdomen, extracted a dead child, divided the funis, and removed the placenta. When Guggenburg arrived he stitched up the wound, and after a short period the patient recovered, and has since enjoyed excellent health. Guggenburg exhibited the woman at a meeting of German practitioners, held at Tetschen, and expressed his opinion that an incomplete spontaneous rupture of the uterus had taken place and that the woman had not penetrated the organ with the razor. The case was further remarkable, inasmuch as although the hemorrhage was at first profuse, it gradually afterward spontaneously ceased, and although a large quantity of the intestines prolapsed and were replaced with a great difficulty, the recovery progressed rapidly.—*Provincial Medical Journal, Dec.*, 1885.

CON. TINC. AVENA SATIVA FOR THE OPIUM HABIT.—"A fraud, a delusion, and a snare." (See Medical Bulletin, October 15, 1885.)—C. H. Spilman, M. D., in a letter to Messrs. B. Keith & Co., dated Harrodsburg, Ky., Nov. 23, 1885, says: I have been using your Con. Tinc. Avena Sativa for several years; and have found it useful in the following morbid conditions: 1. In the nervous exhaustion resulting from over-brainwork, I regard it as a specific. 2. In cerebral hemorrhage, resulting in paralysis, it is very useful in restoring both sensory and motory power. 3. In stomatitis depending on deficient nerve-power in the digestive apparatus; it will cure that. 4. In alcoholism it will supply the intolerable craving for alcoholic stimulants, and enable the inebriate to glide out from under its power with much

more ease. 5. It is very useful in what is called opium habit, by reinforcing and fortifying a resolution to abstain.—*Medical Brief.*

TREATMENT OF INCARCERATED HERNIA.—Finkelstein reduced fifty-four cases of incarcerated hernia in the following manner: The patients were placed on their backs, and of a mixture of 100 parts of æther sulph. and 20 parts of oil, one to two tablespoonfuls were poured upon the hernia—say every quarter hour. (The oil is merely to prevent the burning sensation of the æther.) After three to four such applications the bowel was usually liberated and returned with hardly any manipulation. F. explains this effect by the relaxation of the abdominal ring caused by the æther, and by the low temperature produced, causing a reduction in the size of the bowel and inducing strong peristaltic motions.—*Centralbl. f. Chir.*

TEST FOR SUGAR IN URINE that is convenient to prepare and of sufficient accuracy to apply to ordinary cases of urinal analysis for sugar. Dissolve 60 grains of sulphate of copper in pure crystals, in 1 fl. ounce of pure glycerine by the aid of a little heat. Then add 5 drops of this to 1 fl. drachm of liquor potassæ in a test tube; boil a few minutes to test the purity of the test fluid, which on remaining clear is to be trusted, and to which a dozen drops of urine is to be added, and if sugar be present in quantity the usual red precipitate of reduced copper is seen to form. If sugar is in small quantity only, the process is modified as follows: add ʒ ss of the suspected urine to the above test fluid, boil and set aside; if sugar be present, even in minute quantity, the liquid, as it cools, will turn an olive green and become turbed. This is known as Holland's test, but we have known of it for twenty years, having seen it first in an English Magazine.

BROMIDIA IN PLACE OF MORPHIA.—Wm. V. Bonner, Fairfield, N. C., says: "I am using Bromidia in my practice and find it a valuable remedy—all that is claimed for it. I could not possibly dispense with it in my practice, for it supplies the place of morphia, now so generally used; will do the same work, and is far preferable. I have used it with marked success in every case where I would have used morphia; surely an invaluable addition to the *materia medica.*—*Med. Press.*

BISMUTH AND HYDRASTIS ELIXIR is recommended by Dr. G. W. Whiteley in the Therapeutic Gazette as the best form of bismuth in diseases of mucous membranes and from which he has derived the best results. It is valuable in cholera infantum in the first stage, yet of great value throughout the disease. He speaks in high praise of it in gonorrhœa, with a little zinc sulphate, as a local remedy.

ENLARGEMENT OF THE LIVER AND GASTRO INTESTINAL CATARRH often go together. For these diseases Dr. J. M. De Costa thinks well of phosphate of soda in drachm doses, given in hot water and repeated three times a day. If it acts on the bowels too much (there is always more or less obstinate constipation in these troubles) reduce the dose. The skin over the liver may be painted with tinct. of iodine diluted half. In these cases there is an absence, generally, of jaundice, but the liver is considerably enlarged and congested, the pathology partaking of a chronic inflammation of the intercellular substance—a fibroid enlargement with some fatty degeneration. Such cases are not unfrequently the result of long continued gastro intestinal catarrh.—Abstract from the *Thera. Gaz.*

HYOSCYAMINE IN CHOREA.—The patient, a boy, æt. 10. Was unable to walk at all. Could not raise anything to his mouth, nor protrude his tongue, nor speak a word, and was much emaciated. Prof. DeCosta placed him on hyoscyamin- -1-200 of a grain three times a day. The dose was after a while increased to 1-100 of a grain three times a day, which produced some little dryness of the throat. He immediately began to improve, was out of bed in a week, and within three weeks was entirely cured. Prof. Goss frequently calls attention of his class to the tinct of hyoscyamus as a valuable remedy in some forms of chorea of women and children, especially those cases that are reasonably traced to congestion of the motor tracts of the centers.

ECZEMA OF SCALP.—℞. Salicylic acid, grs. xv; tr. benzoin, ʒ ss; vaseline, ʒ xiiss. M. Make an unguent and apply to the parts afflicted two or three times a day by rubbing in a sufficient quantity each time.

In "running ears" in children we have found—very fine boric acid, 2 parts; sulphate of hydrastin, 1 part; M. Pack in the ear, the best thing.

CHRONIC CYSTITIS.—The Bulletin was instrumental in calling my attention to the combination of drugs known as lithiated hydrangea, and a case of chronic cystitis has yielded so happily to its administration, that its report may be of interest.

Patient, a married lady, æt. 30 years, suffering from calculi, much reduced in flesh, of nervous temperament, and desponding, hypochondriacal disposition. I had used at different times the simple fluid extract dydrangea, uva urci, buchu, flax seed tea, and elm water, as well as washing out the bladder with a solution of nitrate of silver, etc., without success. I then commenced the use of lithiated hydrangea (Lambert) in teaspoonful doses four times a day, and after three days increased to tablespoonful doses. At the end of the first week I could see no marked change, but persisted in its administration. On the morning of the eleventh day of treatment the patient was reported much worse, and my visit found her suffering intensely and continuously passing water, in small quantities, containing clots of blood. I injected four ounces flax seed tea and laudanum into the bladder, which partially relieved the pain and tenesmus, and enabled the passage of a large quantity of water, containing three ounces, by weight, of what I supposed to be phosphate of lime. I then added fifty per cent. of the fluid extract of buchu to the lithiated hydrangea for several days, during which time she continued to pass the brick dust deposit, which was followed by a gradual improvement in her general condition. I used no other treatment, except to keep hot hop poultices over the pubis. She now has no trouble whatever in passing her water, and no pain or soreness over the region of the bladder. I must ascribe the ultimate benefit to the lithiated hydrangea on account of its removal of the cause of irritation: *i. e.*, the dissolution of the calculi. P. MCADAMS, M.D., Rosedale, Ohio.—*In Medical Bulletin.*

FOR holding and fixing the embankments of sandy or light soils, Vick in his Illustrated Monthly Magazine for March, tells us there is nothing better than the double poppy. Scatter the seeds over the surface and they will germinate in a few days. In two weeks the roots will begin to hold the soil and finally interlace, forming a strong network. The plant seeds itself after the first year. This practical information may be made eminently useful in the South. Send to Vick for your seeds. We will send this splendid monthly for 75c. in club with the G. E. M. J.

EDITORIAL.

POPULAR SYMPATHY WITH IRREGULAR PRACTITIONERS

Is the burthen of a jeremiad in the April issue of the Polyclinic by its editor. The unhappy scribe writes, among other things: "Far more seriour, however, is the feeling, undoubtedly widespread, even among intelligent persons, that the prosecutions *instituted* by *regular* practitioners are dictated by jealousy and not for the public good."

Just after reading the editorial in the Polyclinic our eye fell on the following in a newspaper:

"A few years ago this town had only one physician, and he not a regular. Then only a small plot answered for a cemetery. Now there are any number of regular physicians and the graveyard is full, and the town has purchased fifty acres additional." —*San Bernardino Times.*

There is a double distilled refinement in the above two extracts which shows exactly how odious contrasts are, and why "regulars" wish the "irregulars" should be squelched by medical legislation. There are tens of thousands of the same kind of contrasts lying loose all over these United States, to be easily brought forth any moment. Atlanta has added another big cemetery for the use of her 120 Allopath "regular" physicians—the old one of 100 acres is already full.

The editor of the Polyclinic, as though anticipating by intuition and instinct the kind of answer that would be wafted back to his jeremiad, writes:

"It would, perhaps, be impossible to get the older States to pass laws limiting absolutely the practice to those who possess diplomas from schools of recognized standard."

The assumption that a "recognized standard" exists in the United States or in any State is the whole bone of contention, and surely places the Allopaths in the attitude of a trades-union sect. What sensible man claims that any "recognized standard," in religion or medicine, has any existence, in law or in equity, in a liberal and progressive government?

THE SPLIT IN THE CAMPS OF THE ALLOPATHS is one of the signs of the times that the Old School is crushing under a weight accumulated by its intolerance and non-progressiveness.

Now is the time for the Eclectics to expand and strengthen their organizations. Now is the very moment when the brightest prospects are presented to us as a school of medical men to take the front place in the world of affairs in medicine. We are the better calculated to succeed than our enemies because we are not sectarian in spirit nor tendency. We hold no exclusive dogmas as do the Allopaths. We are abreast of the age in progress, and have made a magnificent record during the last two decades.

NEAR AT HAND IS THE COMING NATIONAL. But a few days, as it were, and the event will burst into life. What anticipation! The grand possibilities that are to come out of this national meeting in Atlanta, the first held in the South! That meeting is to be the greatest congress of the liberal medical profession that ever assembled in any country. All legally qualified liberal physicians must feel that to them are extended invitations, cordial and fraternal, to honor the National Association with their presence, and aid its deliberations with their counsels, and promote its interests by their hearty and zealous co-operation. Arrangements have been made by the local committee for a grand reception and a regal banquet.

Prof. Wilder, the Secretary, says there will be large delegations of Northern and Eastern Eclectics, all of whom expect to meet an equally large attendance of their Southern brethren. We believe, from the extensive correspondence we have had with our brethren in the South, that nearly all our best men will be present. We all feel that the National will increase the money value of our profesional labors and advance our cause one thousand times more than the money cost it will incur to attend it. We are a unit on this point.

THE GEORGIA ECLECTIC MEDICAL ASSOCIATION will meet in Atlanta on Tuesday, the 15th day of June, in the large hall of the Georgia Eclectic Medical College, 48 Butler St., at 10 o'clock, a. m., sharp.

President Nance sends out a cordial invitation to all the liberal physicians in this State and elsewhere, who are in sympathy with liberal and progressive medicine, to attend this meeting, and to all the Eclectics of Georgia to become members of the Association, and lend a helping hand to roll onward the car of medical progress. All the members of the Association, who are not un-

avoidably prevented, are expected to be in attendance. The Association is entitled to 15 delegates to the National, who will be elected then and there. Come one, come all.

W. M. DURHAM. Sec'ty.

THE SPLIT IN PHILADELPHIA AMONG THE ALLOPATHS is on principles, a revolt, all owing to disagreements that have arisen about how the International Medical Congress should be conducted, and who shall and who shan't be members. The split marches all the way from Philadelphia to St Louis, and will then enter the American Medical Association as a gem of purest ray. Between the split on account of the "New Code" and the split on account of the International Medical Congress, the American Medical Association and the orthodox Allopaths (all are one) have the best entertainment that could possibly be afforded them.

The International Medical Congress is the nightmare that sits on the Allopathic chest, but the Eclectics will attend the Congress in force and adjust and help to settle the muddle. We will be at the Congress without fail.

Prof. Briggers laughs and says the Allopaths are intending to make the International Congress a close communion corporation, and will issue tickets of admission to the faithful only. Well, we will see about that. The Hardshell Allopaths, the mud gods of medicine, cannot control the International Medical Congress by any cranky, arbitrary acts. We will go to the Congress; this is settled; and we will be admitted, too.

ARCHER'S PATENT GYNECOLOGICAL CHAIR.—We call the attention of our readers who may be in want of an office chair to this one in particular, because we believe it is the best, the simplest and the most durable one for the physician's use, and answers every conceivable purpose. Send to the manufacturers for one of their illustrated, descriptive and priced circulars. All who have used it commend it as the best thing of the kind out.

TO THE FRONT—EELECTICISM! Yes, the word represents the progressive principle in medicine. It is this name—this word—yes, this very principle that has made medicine modern and has snatched it out of the darkness of wretched uncertainty and barbaric empiricism of the recent past.

ALBUMINURIA.—Dropsy of the abdomen and chest—general anasarca—apocynum can. and iris versicolor the remedy. We called attention to the apocynum can. in a previous article, in which we set it forth as the remedy in parenchymatous inflammation of organs, and as a heart tonic. Recently we had a case of a woman with kidney disease, general anasarca and collection water in the abdomen, and some in the pleural cavity. Urine was scanty, highly albuminous; pulse very rapid, weak and small; intermittent. Some valvular disease of heart on left side. We gave her R. Biggers' tinct. apocynum can., gtts. x; fl. ex. iris versi., gtts. x. M. S. To be taken every 2 hours in an infusion of polygonum punct. Two days after the urine was increased in quantity more than ten fold, and the albumen absolutely decreased to half. Treatment continued three weeks, urin nearly free from albumen, water nearly gone out of the cellular tissue, and all out of pleura. In six weeks abdomen clear of fluid. The combination of apocynum and iris make a very desirable medicament in all forms of dropsy.

DIGESTIVE FERMENTS.—Prof. H. H. McCobe, of Indiana, writes to the Indiana Eclectic Medical Journal that the Digestive Ferments, as prepared by Messrs. Fairchild Bros. & Foster, of New York and London, and the "Peptogenic Milk Powder," prepared by the same firm, are truly what they purport to be; that he has tested them satisfactorily in practice, and also chemically and physiologically, and knows whereof he writes. Prof. M. says he endorses and recommends these preparations from the standpoint of a practicing physician.

Write to this firm, 82 & 84 Fulton St., New York City, for samples of their preparations and descripitve catalogue. Mention this journal. See their ad.

BOOK OF DOSES and INDICATIONS for the fine preparations of H. M. Merrell & Co., Cincinnati, O., is the title of a handy and useful little book, neatly gotten up by the above firm. All the articles are alphabetically arranged by their scientific titles, and for ready reference; a brief but terse synopsis of their therapeutic use, dose and other useful aids follow. Drop the publishers a card, mention this journal, and they will cheerfully send you a copy; also a large priced catalogue of all their excellent preparations. This is one of the oldeat houses in Cincinnati.

THE SEVENTH ANNUAL ANNOUNCEMENT

Indiana Eclectic Medical College, session 1886–87 is to hand. From it we have gathered the gratifying intelligence that the disagreements that heretofore existed between the adherents of the Eclectic Medical College and the Beach Medical Institute of Indianapolis, have all been amicably adjusted and the two colleges consolidated under the name of the Indiana Eclectic Medical College. We congratulate the liberal profession of Indiana and hope never again to see any partisan rivalry in our ranks in that State.

We hope our Iowa brethren will be able to heal their differences and unite in one good and strong college in that State.

Southern Eclectics have none but the kindest, warmest and fraternal feelings toward Eclectics every where.

PICHI, the new Chilian remedy for cystitis, calculus, etc., has already taken a high position in the materia medica, and ranks with such other new remedies as cascara sagrada, coca erythroxylon, rhus aromatica, etc., all of which we believe were first placed in the hands of the medical profession by Messrs. Parke, Davis & Co , of Detroit, Mich. Pichi is, undoubtedly, a very valuable medicament in bladder affections, and seldom disappoints you, even in the cases of old men who have prostatic diseases.

JACOBS' PHARMACY, ATLANTA, GA.—We call special attention to the advertisement in this JOURNAL. Mr. Jacobs is a competent and painstaking pharmacist, puts up good and reliable preparations and sells them at reasonable prices.

We received a batch of his preparations at the College Dispensary last winter for the use of our clinics, and have found them reliable and satisfactory. Give him some of your patronage.

DELEGATES IN ARKANSAS, KANSAS AND MISSOURI will see that the Committee of Arrangements has secured reduced railroad fare from trunk lines running through those States, and can readily procure their tickets to the National by observing the rules established by all the railroad companies. We enclose in this number a circular which will give you all the needed information. Eclectics of the West now have an excellent opportunity to attend the National.

BROMIDIA.—This standard preparation still stands the test of the profession, and is regarded as one of the essentials in all first-class drug stores. It is certainly a fine combination.—*American Med. Jour.*

Dr. S. B. Honts, of St. Louis, Mo., says Bromidia is the best hypnotic a physician can use when he wishes to give restless and sleepless patient rest, and runs no risks in doing so.

BUTTERMILK is a good substitute for sweet milk as a diet in typhoid fever, diarrhœa, and diseases of the gastric intestinal tract, especially those of ileum and colon. Good, fresh buttermilk was once a standard diet in all cases of fever with the people of central Michigan 25 years ago, and all cases did well on it—better than on skimmed sweet milk.

OMINICO is claimed by Dr. Henry F. Beam, of Johnstown, Pa., to be an efficient, safe and non-irritating antiseptic and disinfectant in surgery cases. See the ad. and write S. W. Neuer & Co., No. 10 Cedar St., New York City, for a sample and mention this journal.

IN GONORRHEA we want nothing better than—℞. Boric acid, ʒj; sulphate hydrastis, ʒss; glycerine, ʒii; water, ʒij; M. Use with a syringe. Inject every hour during the first day or two, then every 3 hours. Be sure to retain the injection 3 to 5 minutes every time. This is essential to effect a quick cure.

BORACIC ACID AND CARBOLIC ACID combined make the best and the safest antiseptic externally and, without much doubt, internally administered.

POINTS.—Write to Peacock & Co., St. Louis, for a sample bottle of their preparations. Many good physicians are using them with satisfaction.

COLDEN'S LIQUID BEEF TONIC is a valuable preparation. Read the ad. on 3d page of cover and send to the firm for a sample. Mention this journal.

IN MUSCULAR RHEUMATISM manaca has been found of service. The fl. ex. in full doses cured an inveterate case in our practice, repeated three times a day.

TRANSACTIONS of the National Eclectic Medical Association of the United States of America for the Years 1885–86; including the Proceedings of the Annual Meeting held at the City of Altoona, Pa., June, 1885, together with the Reports, Papers and Essays furnished, submitted and read before the several Sections of that Body. Edited by Alexander Wilder, Secretary. Volume XIII. Published in behalf of the Association.

The volume opens with a portrait of the retiring President, H. K. Stratford. Following is a list of the present officers, constitution, by-laws and standing resolutions, and the proceedings of the meeting at Altoona last June. The by-laws and constitution of the Mutual Aid Association of the National Eclectic Medical Association of the United States were adopted, and the society is now ready for business. We believe Eclectics in all sections will give it their hearty co-operation and support. It is, in fact, a life assurance association for the benefit of Eclectic physicians and their families.

This volume of the Transactions contains forty-nine papers, distributed through the various sections, and many of them are of high intrinsic merit. The Association has on its roll 361 members only. This is no credit to us, and we hope the succeeding volume will show a membership of twice or three times as many members. Were Eclectic physicians only half as zealous and devoted to the success of their principles, in a popular sense, as their wily enemies—the Allopaths—the National would have one thousand names on its roll of members.

The editor, Prof. Wilder, has creditably performed his part, for this volume is, if possible, better than its predecessors in many respects.

The coming meeting in June, we believe, will augment the number of members by nearly one hundred, if not more, by bringing out and adding to it the leading element in the South—a desideratum devoutly desired.

THE FIELD AND LIMITATION OF THE OPERATIVE SURGERY OF THE HUMAN BRAIN. By John B. Roberts, A. M., M. D. P. Blakeston, Son & Co., 1012 Walnut St., Philadelphia, Pa. Price, $1.25.

Dr. Roberts has written a very readable little book, which we commend to the study of all who have much to do with head injuries, though we do not quite agree with him that intra-chra-

nial inflammation is at the bottom of all, or nearly all the symptoms usually classed under the head of compression. We have seen much of head injuries with depressed fractures, and many apparently hopeless cases got well without the assistance of the trephine. When the author claims that trephining the skull is attended with but little more danger than cutting off a finger, he goes beyond the experience of good men, and his position is reversed when he admits that inflammation and not compression is the chief danger that is upon the patient. True, the brain will tolerate a deal of compression by fractured bone, if no inflammation of a serious nature sets in, but will the case be made better by farther cutting and slashing? The use of the trephine may make an occasional brilliant hit; however, the record against it is anything but cheering. The book has some good points.

THE VALUE OF VACCINATION: a non-partisan review of its history and results. By George William Winterburn, Ph. D., M.D, Editor of American Homœopathy, etc. Philadelphia: F. E. Boeriche, 1886.

We believe Eclectic physicians are the only class of medical men, taken as a whole, who glean, garner and rake in knowledge and information on medical topics from all and every quarter indiscriminately, and who make diligent and conscientious efforts to prove all things and hold fast to all that is good. The book before us is well written, by a gentleman apparently well posted in the whole range of facts and figures relating to vaccination as a preventive against small-pox. The value of what he has stated in his book will depend on the way men look at the presentation of the case by the author. One sees that the purpose of the book is finely covered up by skillful arrangement of figures and opinions, statements and counter-statements. It is an artistic structure, this book is, sure enough; but be believe every candid, honest truth seeker should read it. The book is the most powerful and seemingly non-partisan arraignment of vaccination as a protection against small-pox we have ever read, because it carries on its face candid and non-partisan intentions. The chapter on the "Extent of protection afforded by Vaccination" we advise every man to read, no matter what views he may entertain on the subject. We must admit that the partisans of vaccination have been and are yet intemperate in all their claims. Yet, we stick to it till we can get something better.

COCO ERYTHROXYLON and its Derivatives. A resume of their history; botanical origin; production and cultivation; therapeutical application; physiological action, and medicinal preparation.

This is the title of a very well written book, which we see is published by that unresting and ever active firm, Parke, Davis & Co., of Detroit, Mich. It is a straightforward and perspicuous narration of facts regarding the Coca shrub and its derivations, especially its alkaloid Cocaine, and the wonderful role its preparations now play in practice, and form a chapter in the history of medicine and surgery full of interest to the physician and surgeon, and the progressive therapeutist. This little book reads like a romance, so full is it of instruction and entertainment. It is put forth for the benefit and is in the interest of the profession. We advise you all to read it who have not. Send for it and mention this journal. Dr. J. W. Stone, of Macon, Ga., will send you a copy on application.

THE CENTURY MAGAZINE is always up to our expectations in the excellence of its articles. The May number opens with a frontis picture of Hawthorne. Hawthorne's Philosophy, by his son, that is pleasing. The Helmet of Mambrino, by Clarence King, is full of quaint humor. The Evolution of Faith, by Rev. T. T. Munger, is good. The illustrated article on American Country Dwellings is valuable, and a Californian's gift to science is of superior interest at this time. Gen. Geo. B. McClellan's last article on the Antietam Campaign, with a fac simile of his writing is at this time, just after the tragic death of the great soldier, full of interest. Then we have articles—"topics of the times"—that are on living questions. Poetry, song and story in this month's Century are full of merit. The illustrations of the Century are equal almost to the finest steel engravings, and they abound in generous profusion. High art and literature combined.

THE PHRENOLOGICAL JOURNAL for May is before us. We cannot say too much in its praise as an educator and elevator of human nature and character Every household where young people are being raised should have this journal regularly make its monthly visits. The number is full of valuable and pleasant reading, on a large variety of useful topics. $2.00 per annum. Fowler & Wells Co., publishers, New York City.

THE Pan-Spermatic theory of Spallanzani has become the doctrine of science to-day. Anterior to Spallanzani was Rodi, an Italian philosopher, who formulated the doctrine of "*Omne vivam ex vino*" (every thing from a living thing). Accordingly, Virchw formulated his doctrine, "*Omnis cellula e cellula,*" which is the bed rock of the histology and pathology of the day. Spallanzani, in the middle of the eighteenth century, promulgated the doctrine that the atmosphere is teeming with invisible germs. The doctrine has become the corner-stone of the modern germ theory, and rests on the foundation rock of Rodi's formula.

CHARLES DARWIN: his Life and Work. By Grant Allen. Published by J. Fitzgerald, 393 Pearl Street, New York. Price, post free, 30 cents.

A pleasing narative of the great naturalist, with philosophical appreciations of his immortal treatises. Whoever would know the man Darwin, or would estimate his influence on the world of thought, will find in this volume precisely the information he requires.

THE COMING FREEMAN; or Justice and Equality to All. By John King, Cincinnati, Ohio.

The author is an advanced philosopher and a philanthropist, and ardent advocate of justice and equity to all. The book is a powerful presentation of the rights of labor and the wrongs it suffers.

JOURNAL OF RECONSTRUCTIVES, 2D NO., has reached us. It is a creditable publication, devoted to food and food stuffs, and should be supported by all schools of physicians. You will derive valuable information from it about how to feed your patients, prepare food, etc. Quarterly. John Carnrick, publisher; Wallace Wood, editor. New York City.

THE BEST FOR CHILDREN.—The acid mannate is the best remedy I have ever used, especially for children, when I wish to arouse the secretions and not disturb the organs of digestion.

Elmwood, Ind. J. L. SPITZMESSER, M.D.

Where women have aborted during previous pregnancies, or in any case where abortion is feared, aletris cordial should be continuously administered during entire gestation.

UTERINE TONIC.—Aletris cordial (Rio) is, without doubt, an excellent uterine tonic. I am more than pleased with the satisfactory results produced by its use in cases of uterine troubles which have come under my observation I regard it as an invaluable medicine.

Mobile, Ala. ——— H. T. Cox, M D.

S. Shepherd, M.D., 345 Union St., Brooklyn, N. Y., says: I have prescribed celerina frequently, and think highly of its merits in all nervous exhaustions.

DIPHTHERIA.—I have used Kennedy's pinus canadensis in diphtheria, and consider it of inestimable value.

York, Ia. ——— H. W. SCALES, M.D.

SORE THROAT.—Kennedy's ext. pinus canadensis, dark, has proved a good remedy in treatment of sore throat and other disorders of the mucous surfaces.

GONORRHEA.—One ounce of Kennedy's white pinus canadensis and seven ounces of water is a cheap and satisfactory treatment for gonorrhea, used as an injection three or four times a day.—*Med. Brief.*

The increasing demands for their goods, by the medical profession in foreign countries, has necessitated the Rio Chemical Co., of St. Louis, to establish offices in London and Paris.—*Med. Brief.*

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THE
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ORIGINAL COMMUNICATIONS.

PURPURA.

BY M. F. DUMAS, M. D., BALD KNOB, ARK.

A number of affections presenting as a common symptom the extravasation of blood into the tissues, more especially of the skin and mucous membranes, quite irrespective of etiological or pathological considerations, have been described by numerous authors under the general heading of "Purpura." The tiny ecchymosis caused by the bites of fleas are denominated "Purpura pulicosa"—the larger bruises from external violence, "Purpura troumatica"; the extravasations accompanying scurvy, "Purpura scarbutica"; extravasations of malignant variola, "Purpura variolosa," etc. Hence the term purpura used to describe a symptom or *expression* of diseased conditions of non-maladies.

There is a peculiar morbid process having for its constant and characteristic expression the spontaneous escape of blood from the blood-vessels; hence we are not authorized to name an interstitial hemorrhage from external violence, or from the action of a specific poison circulating in the blood, and disorganizing it and its containing vessels, as, for instance, phosphorous-poisoning, or from the effects or influence of certain zymotic diseases—purpura. It must be confessed, perhaps, that we do not possess a knowledge of any definite chain of morbid processes constituting a distinct disease that may be designated as Purpura; and yet in certain individuals we are able to recognise a set of symptoms or expressions varying greatly in intensity, from the most trivial petechial eruption to profuse and fatal hemorrhages, accompanied by a train of manifestations which we are unable to connect with any of the causes already named, and which, in-

deed, depend upon no perceived and fixed exciting cause with which we are familiar. The time may come that Purpura, as we now comprehend it, will be proven to be merely a set of phenomena due to widely differing influences, acting upon the blood and blood vessels, and the term purpura will disappear from our nomenclature as pointing to or indicating a special disease, but will be preserved as denoting a symptom, or an expression of diseased conditions.

At the present time Purpura is generally understood to be a *tout ensemble* or group of symptoms characterized by the effusion of blood into the tissues of the body, or upon its free surfaces, or into its serous cavities, which seem to arise spontaneously, and for which we are unable to assign a specific cause. According to this view of the nature of purpura, we are forced to exclude from present consideration blood extravasations from internal or external violence the action of the specific principles of contagious or infectious fevers, the chyscrasia of scurvy, the effects of poisonous substances, and, in short, any of those affections of which the escape of blood from the vessels constitute an epi-phenomena.

Purpura presents three varieties, viz:

1. Purpura simplex.
2. Purpura hemorrhagica.
3. Purpura rheumatica.

To these may be added, for convenience—

Three sub-varieties: Purpura urticous; Purpura populosa, and Purpura nervosa.

The three first are not distinguished by sharply outlined differences, but merge the one into the other; now one, now another set of expressions predominating.

The difference between the three last forms are not very important, only as a clinical import. Whatever variations may present, may with propriety be taxed or ascribed to complicating influences.

Purpura simplex.—As the name denotes, this is the mildest form of purpura, and often escapes observation. It often begins abruptly, in the enjoyment of health, without the slightest subjective symptom, or the extravasation may be preceded some days by some little discomfort, aching of limbs, sluggishness, anorexia, even a small amount of fever. The eruption generally appears first upon the lower extremities, preferring the flexor

surfaces of the thighs (Duhring), but frequently upon the legs, and extending to the upper extremities and trunk; usually the face is not affected. The lesions vary in size, from that of a pin-head to that of a finger-nail—*petechial*, or they may be linear—*vibices*. They remain discrete, and do not increase in size. Each spot of hemorrhage will endure from one to two weeks. At first the lesions are of a livid red color, and remain unaltered when subjected to pressure. In consequence of the metamorphosis of the hæmatin preparatory to its final absorption, the color of the spots change, from crimson to purple, to green, to yellow, and finally fades away. Recent spots are sharply outlined with, sometimes a faint encircling zone of hyperæmia, but as they become older their margins become indistinct. While the first lesions disappear, others continue to develop, and the affection may thus be protracted for weeks. During the course of purpura simplex the blood vessels of the skin alone are affected; the deeper tissues and mucous membranes probably remaining unchanged. Throughout the attack the general health apparently remains good. As an occasional symptom there will be present a few vesicles or blebs, containing blood, upon the skin. The extent of the general eruption may vary from a few scattered petachial to a copious and startling number of spots. In elderly persons, purpura simplex is sometimes met with, and termed purpura seniles. In these cases it may be caused from degeneration of the vascular walls alone.

Purpura hœmorrhagia—Morbus maculosus Werlhopii.—In this form, we have added to the usual symptoms of the simple form hemorrhages into and from the various mucous tracts—the nasal, faucial, phryngeal, gastric, intestinal, renal, uterine, and, once in a while, pulmonary mucous membranes—and, exceptionally, into the various serous membranes and cavities. It may begin abruptly, in apparently vigorous health, or after some premonitory symptoms of several days' sensations of discomfort—headache, pains, anorexia, want of energy—or it may occur as a transition from other forms of purpura. Usually fever is absent. The hemorrhagic spots are larger than those in P. simplex, acquiring the size of coins, or even larger. Spots soon appear upon the visible mucous membranes, and free hemorrhages are frequent; indeed, the hemorrhages may be the first symptom noticed. Epistaxis is common; but hemorrhage from the mouth, stomach, and intestines are also frequent results. The gums are almost

constantly affected, and are covered with blackish scabs, upon removal of which the mucous membrane presents a pale and swollen appearance—an important point in diagnosticating this affection from scurvy. Vesicles and blebs filled with blood form on both the skin and mucous membranes. They quickly rupture and discharge their contents. Bleeding from the stomach is revealed by the vomiting of a brownish material resembling coffee grounds; in that from the intestines by passing of black, tar-like evacuations. We can distinguish pulmonary hemorrhage from hæmatemesis by the frothy and arterial character of the blood. Hæmaturia may proceed from any part of the urinary tract. Hemorrhage may occur from several parts at the same time, and may be very copious. Extravasations at greater or less extent may occur in the mucous membranes, as in the duena. In some cases they take place in the serous membranes, with or without effusion, into the serous cavities. It is only in necessarily fatal cases that the effusions into these cavities are encountered. Occasionally hemorrhages are observed into the substance of the lungs, the brain and other viscera, as well as into the tissues generally. At the commencement of these hemorrhages the general health may appear unimpaired, and if few in number and not profuse but slight evidences of debility will be shown throughout the attack; but it is often the case that the loss of blood is excessive and long continued, and expressions of profound anæmia supervene. The patient becomes greatly exhausted; intense pallor is present, soon followed by general œdema. Attacks of syncope are frequent, and in fatal cases—which are not common—death results from asthenia. This may occur after a few days, from the profuseness of the hemorrhage; usually, however, only after several weeks. The cutaneous lesions continue to develop throughout the attack, either irregularly or in successive outbreaks, scattered over the general surface, involving the face less frequently than other parts. These spots undergo the color-changes peculiar to extravasated blood. Usually fever is absent throughout the attack, but may appear at the height of the affection, but the temperature does not run high. Local inflammations are generally absent. In favorable cases recovery follows the gradual mitigation and disappearance of the symptoms, but relapses are frequent, and convalescence may be retarded for months.

Purpura rheumatica.—Peliasis rheumatica.—Scœnlein, Fuchs,

Hebra, Kapois, Neumann, and others, claim that a peliatis rheumatica is an affection in which the symptoms of purpura simplex are associated with pain, and often with effusions into the articulations of the knees and ankles, and claim this as an independent malady. Some regard it as related to Erythema nodosum, with which affection it possesses some features in common. It perhaps, however, constitutes a complication of ordinary purpura. The entire absence, almost, of symptoms characteristic of rheumatism shows conclusively that it is not primarily rheumatic. Hence it cannot be an independent affection, considering its intimate relations with other forms of purpura. It begins, commonly, with malaise, anorexia, debility, and, sometimes, with mild fever. Soon pains, more or less acute, present in the articulations of the knees and ankles. There may be some effusion into the joint and cutaneous œdemat After a few days an eruption presents a petechiæ, first near the painful joints, but soon extending, involves, in many cases, even the head and trunk. Often, at first, the eruption is surrounded by a fine halo of hyperæmic injection. Upon the appearance of the eruption the pains usually subside, and the malady may be completed after a single outbreak ; more commonly, new joint-pains are experienced, fresh crops of petechiæ appear, and the trouble may be prolonged for weeks or months, the patient suffering, in the meantime, very much in general health. The lesions may be cutaneous only ; very rarely any hemorrhage from mucous surfaces. Albuminuria may present. Some authors claim they have observed an annual type—the spring and autumn the usual seasons for the outbreaks. This is supposed by some to indicate a relationship with erythema nodosum and multiform. Cardiac murmurs may be detected in the course of purpura rheumatica, but these may be caused from anæmia, or may antedate the purpura. There is no authentic record of purpura rheumatica resulting in endo or pericarditis. The purpuric effusions appear to act as an irritant upon the tissues, and to excite inflammation. In some rare cases gangrene of the mucous coat of the intestines has resulted from extensive hemorrhagic extravasations, and from a similar cause cutaneous gangrene has been known.

Etiology.—We are entirely ignorant as to the immediate cause of purpura. Both sexes, and persons of every age, are affected by it. While the debilitated suffer with it ; those in vigorous health are not exempt from it. It is sometimes observed during

convalescence from other maladies. It cannot be said that the extreme poverty-stricken classes are especially predisposed. Between purpura and hæmophilia, etiologically, there is a great difference. Purpura is not hereditary, nor do we believe there is a purpuric diathesis in the strict sense of the term. Some persons seem to have a predisposition to the complaint. Petrone and Watson Cheyene claim that purpura hemorrhagica depends upon a minute organism—bacilli and micrococii—but this is erroneous, if from no other fact, the fact that more than one variety of micro-organism has been observed cannot fail to excite suspicion of erroneous conclusions.

Prognosis.—Purpura usually terminates favorably. Its course runs from two to six weeks. Relapses and remissions are not uncommon. The simple form is of very little gravity. Purpura rheumatica nearly always results in recovery. Purpura hemorrhagica is of much more serious import. Even here, notwithstanding the patient may become very much debilitated from loss of blood, recovery is the rule. In fatal cases, death ensues after prolonged and profuse hemorrhage. Anæmia may persist long after the disappearance of all other purpuric symptoms.

Treatment.—Mild cases require no drugs. Patients should be guarded against violence. Injuries that might be of no consequence to healthy persons may excite in those who are predisposed to purpura profuse hemorrhages, free or interstitial. Violent emotions and physical efforts must be avoided, as in exciting the heart's action a condition of increased blood-pressure ensues that may readily result in extravasation. There are no drugs that exert a specific influence over the name Purpura, but we have a number of remedies which enjoy a high reputation in controlling the expressions; among these are the aro. sulphuric acid in doses of 15 to 20 drops, every three or four hours. Ergot is an excellent remedy; it can be used hypodermically. The best preparation for this purpose is "Lloyd's Liquid Ergot." Spirits of turpentine has been used with moderate success. Muriated tincture of iron is indicated in anæmic cases; rhus aro. is indicated in some cases, likewise the equisetum hyemale. The various complications that may arise, as well as the general results of purpura, must be treated, if you please, symptomatically, or, in other words, administer remedies as specially indicated. In purpura rheumatica the arthritic pains can be alleviated by using the following, locally: ℞. Oleums, origanum, hemlock, juniper,

sassafras, and wintergreen, aa fl. ʒ i; cut the oils with 1 pint of strong alcohol, then add 2 ʒ gum camphor; ʒ iv chloroform. M. S. Apply with considerable friction and cover the parts with carded wool; at the same time give macrotrys (spc. tr.) and gelseminum (spc. tr.) internally. The often accompanying abdominal pains and colic can be controlled with nux vomica, diascorea, and morphine. Hæmatemesis should have minute doses of lycopus v., ipecac, and digitalis. Hæmaturia can be controlled by minute doses of rhus aro., spirits turpentine, aconite, and heroic doses of gallic acid. The debility from purpura hemorrhages must be controlled with stimulants, as glonoine, brandy, and "Lloyd's Hydrates." Our sheet-anchors in severe cases are: Nux vomica, quinine sul., ergot, hamamelis, hydrastis, and iron. To formulate thus—℞. Lloyd's liquid ergot; Lloyd's hydrastis, aa ʒ i; spc. (distill.) hamamelis, ʒ ij; elixir, simple, ʒ i. M. S. A teaspoonful every two or three hours, for the purpura.

In anæmic cases the following should be alternated, every two hours, with the above: ℞. Mur. tr. iron, fl. ʒ i; spc. tr. nux v. fl. gtts. xx; spc. phosphorus, ʒ i; sulphat quinia, ʒ i; glycerine, q. s. to ad. ʒ iv. M. S. A teaspoonful.

EMBRYULCIA.

SHELLY P. DOWNS, M.D., MONTICELLO, GA.

On Saturday, April 3, 1886, I was called to see Mrs. R., about 7 a.m., a multipara who had been in labor more than seventy-two hours, but now in a state of exhaustion, with all the parturient action of the uterus suspended; not a mere fatigue that is so often witnessed in the parturient chamber, but an exhaustion of the most dangerous sort—constitutional irritation. Upon examination, per vaginam, we found a large normal pelvis, all the soft parts very relaxable; os uteri fully dilated; cephalic presentation; prolapsed umbilicus; ruptured membranes; a preternaturally large fœtus, making it impossible for it to be delivered per vias naturales. The fœtus was not only unsually large, but very much swollen from decay, having died from asphyxia some ten days previous. We saw in an instant that we had an intricate, exceedingly difficult and dangerous case to deal with. The cessation of labor; wirey and rapid pulse; haggard, shrunken countenance; anxiety; jactitation; profuse viscouse perspiration and delirium, all admonished us that not a single moment should

be lost in our efforts to rescue a rapidly perishing woman. The fœtal head was impacted in the pelvis, and there arrested, in consequence of the disproportion of its diameters to those of the osseous canal, through which nature was vainly seeking to drive it. My first effort was made with Eclectics best parturients: f. e. secale cornutum, canlophyllum thalictroides, and gossypii radicis cortex, but all of these were as futile as so much H_2O. My second effort was with the forceps. After persistent trial I succeeded in adjusting and locking the instrument, but we found it impossible to force a delivery without increasing the diameters of the pelvis or diminishing the size of the fœtal head. Our third resort, therefore, was to embryulcia, feeling satisfied that the fœtus was dead, and that the mother must soon likewise perish with the child still undelivered. The usual sensations of abhorence and dread that comes over the obstetrician when compelled to mutilate the living fœtus was for the most part relieved by the self-evident fact that in this case the child was already dead.

We, therefore, perforated the crainum through the centre of the occipital bone with the perforater, pushing the instrument deep into the cavity of the calvarium in order to thoroughly break up the encephalon so as to allow all to escape and thus secure the greatest collapse of the cranium. Succeeding admirably in all this, we now proceed with the crotchet to the work of extraction; and here came the tug of war, decomposition had set in, dissolving the tenacity and continuity of the structures, and bone after bone was removed—the occipital parietals, os frontis, and one of the temporals—without any perceivable effect upon the body of the fœtus, but determined on victory, we changed ends and with the blunt hook end caught up the scalp through the incision, twisted it carefully, but securely around the hook, and here we found firm footing, our attachment was strong and reliable, and not only completely collapsed the entire skull, but exercised a diminishing power over the shoulders and thorax. We soon discovered that we were moving the body of the fœtus, so we traveled now right along on our way, and by sufficient and persistent traction, we soon brought the mutilated head within the grasp of the hand and then completed the delivery at once. The time occupied from beginning to end was ninety minutes. After twenty minutes rest the placenta was removed without any difficulty; a slight hemorrhage ensued, which

was promptly relieved by ergot and opium. The patient was put to bed and after a night's quiet sleep, awoke in the morning with a mental and physical vigor remarkable to behold and recovered more rapidly, to use her own words, than from a natural labor. She is now in good health, without any indications whatever of injury to the generative organs or adjacent structures.

This is the second case that I have had. My first was met with in a primiparia in 1872; a case of puerperal eclampsia, after seventy-two hours of turmoil encephalotomy was practiced; the fœtus delivered, convulsions ceased, the woman saved, and to-day she is the mother of a happy family.

Nearly all the trouble that I have experienced in obstetrics is attributable to mismanagement and ignorant midwives (mostly from the latter). This case had been in the care of one three or four days (and she didn't know the cord from a gut). It will be proper for me to state that I had a medical brother sent for; but it was far out in the country, his coming attended with much uncertainty. My duty was plain and imperative. I saw that delay was death. So, by the request of the husband, patient and midwife, I went into the operation at once and effected a delivery two hours before my counsellor arrived. The great mortality in these cases is caused by the delay. I would not consent to operate in a case unless I believed it would be in time to save the life of the mother, for to kill an innocent, unborn infant and then lose the mother is a misfortune impossible to recover. Therefore, while I am averse to the rash and indiscriminate use of obstetrical instruments, I will use them promptly and understandingly whenever necessity requires. This seemed to be a case of prolonged utero gestation. The fœtus had all the appearances of a child two months old. There was no malformation, simply a large undeveloped fœtus, swollen by the process of decay. The death of the child was occasioned by the compression on the umbilicus cutting off the maternal supply of blood; this occurred some ten days previous, at the incipiency of the labor. The cord had sloughed off at the umbilicus.

I would be pleased to read the reports of cases of any kind by my Eclectic brethren in the Georgia Eclectic Medical Journal giving their modus operandi and treatment, etc., and especially from my college mates, for whom I have an undying love.

A CASE OF CEREBRO-SPINAL MENINGITIS.

A male child, age 8 years. Always been stout and healthy; was taken sick at school on Tuesday; came home complaining of aching all over. I reached his bedside at 8 o'clock, p.m., of the same evening; found in great misery; frontal headache; pain in the left shoulder, arm and leg; also in the region of the kidneys there was great pain; tongue coated white; temperature high; pulse weak, but frequent and irregular; prescribed: R. Tr. aconite, gtts. 15; tr. gelsemium, gtts. 40; bromide potassa, ʒ ½; aqua p., ℥ 4. M. S. Teaspoonful every hour. R. Spirit etheris nitroci, fl. ʒ 2; accetate potassa, ʒ 2; aqua p., ℥ 4. M. S. Teaspoonful every two hours. Order sponge feet and legs with a warm alkaline bath; rub dry with a coarse towel. Rested bad during the night.

Symptoms on second day: Temperature very high; pulse still weak, but frequent and irregular; head hot; extremities cold; between 9 and 10 o'clock, a.m., dark purple spots formed on his face, ears, upper and lower extremities, on his toes, and his toe-nails looked like they had been mashed with a hammer, showing great congestion of the capillary system; they were slightly elevated from the size of a pea to hens' eggs. Cerebral symptoms came up fast; great contraction of the extensor muscles, apithotonus; rolling from side to side; his hand and eyes were in constant motion; talking wild, saying some of his school-mates were hurting him; excessive vomiting of a dark, green color; no tympanitis, abdomen rather flat; tender upon pressure from the madulla ablongata all the way down the spine; I saw the trouble at once. My intention was to equalize the circulation, to get up diaphorecis, and to stimulate the capillaries. Prescribed: R. Tr. aconite, gtts. 15; bella., gtts. 20; lobelia, gtts. 30; aq. p, ℥ 4. M. S. Teaspoonful every hour; the same diuretic. Gave him comp. tr. serpent. in half teaspoonful doses every half hour. Used the spirit vapor bath; counter irritation to the spine of turpentine, capsicum and lamp oil; cold water to the head and plenty to drink, but all in vain. He didn't seem to get any better within the last twenty hours, when I called Dr. H. in consultation at 2 o'clock, p.m., on the third day; he agreed with me on diagnosis, prescribed: R. Tr. valerian, ℥ 4; piperin niger; bi-carb. soda, aa grs. 10; oil sasafras, gtts. 15. Mix. Iodide potassa, q. s. to give 5 grs. at dose. Sig. Tablespoonful every three hours. Bromide potassa, ergot and colchicum to the dia-

phoretic of serpentaria to be given every three hours, alternated with the above: kept up counter irritation and diuretics.

Fourth day: Temperature high; pulse frequent; some fuller; spots more of a violet color, except on his toes, they had not changed; the contraction of the extensor muscles were not so bad; vomiting ceased; catarrhal discharge from his eyes; sordes on teeth; tongue dirty; bowels little constipated. Gave baptisia in 4 drops every three hours; castor oil and glycerine to move the bowels; continued former prescription.

Fifth day: Temperature not so high; pulse not so frequent, and more regular; still delirious, but not so restless; spots not changed; continued treatment.

Sixth day: He was rational; temperature about normal; pulse weak, but more frequent, fuller, regular; tongue dark; sordes; spots not changed; bowels acting from one to two times in twenty-four hours, dark, soft and very offensive; craving something to eat; continued treatment; gave boiled milk, mush, half done eggs, coffee, etc.

He slowly improved until the 9th day, he then gradually give way until the 13th day, when he died without a struggle, in spite of stimulants and nourshing diet. On the 9th day he showed anemia of the brain and spinal cord by his eyes sunk in and left eye went out. We then stopped off the potassa. After we subdued the inflammation on the 6th day, I think that the meninges, brain and spinal cord was so highly inflamed that when it was subdued they had not the power to recover, and he died from prostration; he might have died from suppuration or gangrene by his eye going out. We feared softening of the brain, but I think it would have had to put on subacute inflammation, which I am confident it did not.

Now, I have written this case in full, giving the symptoms as they come. If I have missed it any where, I stand open for correction. The writers I have consulted are very brief on it. Prof. Goss has an interesting piece in the Georgia Eclectic Medical Journal, p. 89, vol. 7, he says: Ergot, physostigma and belladonna are the remedies. Prof. King says: diaphoretics did more good than anything else during an epidemic in Medfield in 1886. This disease is of rare occurrence, it has not prevailed in this country since 1866 until this spring, when it broke out in Fulton county jail among the United States prisoners, and proved fatal in every case, and in most cases in the first twenty-four

hours. I have heard of some other cases in the State this spring. I have my first one to hear of getting over it. If it is not the same, its fatality is equal to the black leprosy in ancient days. I think the profession should study up on its treatment, and if there is any specific let us have it, for it is the worst malady that ever visited the human family surely.

A PAPER.

BY J. M. GRADICK, M.D., SELMA, ALA.

Read at a meeting of the Alabama Eclectic Medical Association, at Montgomery, May 5, 1885.

Ladies, gentlemen and colaborers in the cause of science: Since our meeting last year, many has been the upheavals, devastations and destructions in our country, to mark the footprints of time, and many the heart-aches of households, individuals and communities. But He who rules and governs all things for the wisest ends, has spared and permitted us to assemble again to consult and devise means in regard to the God-given science of healing the sick, and thereby alleviating the woes and ameliorating the condition of fallen humanity.

Much has been written, said and done, and much more remains to be unearthed and brought to light in medicine, and indeed, it may be said that we have scarcely passed the threshold of improvement; and if the healing art is just in its incipiency, does it not behoove us as Eclectics to press forward with much more urgency the foothold we have gained, until the acme of success shall crown our efforts, and the system we advocate shall be hailed as the harbinger of the time, when the sorrows shall be assuaged, the load of melancholy be lifted from the desponding mind, and the wounded spirit be restored to its elasticity, by the true and rational means afforded by the God of nature, in the vegetable kingdom?

Eclectics need not, and will not, tread the old and hard beaten bark-mill track of Æsculapius or Hyprocates to ensure success, but will, with the freedom of thought and independence of action, soar aloft above criticism and the contending elements of discordant and ambitious factions.

Living in a country protected by the same laws as others, with the same right to think for ourselves, and while we are disposed to accord to others the same privileges we claim for ourselves,

we beg leave to differ from Allopathy in the use of remedies, believing ours to be more efficacious in removing disease, and in being more easily assimulated and appropriated by the animal economy.

Take for example the most potent of our remedies, such as lobelia, podophyllin, leptandria, sanguinaria, gelsemium, hamamelis, myricin, capsicum, and a host of others, and we find them more certain in their effects than any others, at the same time less detrimental to man.

To show the inadequacy of their most potent remedies, we need only to quote Dr. Lecture's lecture, where he says: "What merit can physicians flatter themselves they possess," etc. One clinical fact is worth a thousand theories. It is true, we cannot always demonstrate the *modus operandi* of medicines, but we do know that certain remedies have certain effects on certain organs of the body as diuretics for the kidneys, diaphoretics for the skin, podophyllin and leptandrin for the alimentary canal, etc.

The true and successful physician will study the proper combination of concentrated medicines, multiplicity of remedial agents is to be avoided as much as possible, and to show the fallacy as taught in some of the old dispensatories, we find formulas for pharmaceutical compounds containing as high as 60 ingredients. The philosophy of such compounds, we surmise, must be that at least one would reach the case!

In using concentrated remedies, it would be well to observe that certain acids have a tendency to retard their action, while the medicine itself is liable to be decomposed and rendered inert. Among the acids most destructive to our remedies, is the lactic. Podophyllin is not hindered very materially in its operation by acetic acid, but the presence of a considerable quantity of lactic acid will almost entirely suppress its action. Bi-carbonate of soda is the most convenient antacid generally at hand either to precede or accompany the medicine.

We, as Eclectics, have no unkind or jealous feelings toward those who differ from us in the healing art as men or physicians, for we are aware of the force of education and scholastic training, remembering the trite old adage: "As the twig is bent the tree's inclines." But we do wish they, as a class, were more liberal and large hearted in their views of others.

If you ask a teacher of medicine why opium sets you to sleep, his answer will be: from its narcotic power. Nineteen out of

twenty students, at least, are satisfied with it. Why does rhubarb purge? From its cathartic power. Such is the mode in which schoolmen juggle. They too often prefer mystification to reasoning.

For the last ten centuries, at least, they have been doing little else but splitting straws, blowing bubbles and giving a mighty degree of gravity to trifles.

> In the same dull round we see them creep,
> Profoundly trifling, almost asleep,
> Treading the paths their sires trod—
> The past their heaven, antiquity their god!

MY POCKET CASE—CONTINUED.

BY I. J. M. GOSS, M. D., MARIETTA, GEORGIA.

Aurum—Gold—The Chloride.—Aurum acts upon the glandular system, oseous system, digestive organs, vascular system, skin, and the generative organs. It acts more especially on the testicles and liver, but acts upon the entire glandular apparatus. It stimulates the secetory and excretory action of the skin. It excites sexual desire in both sexes. In the male, it produces erotic salacity, with painful priaprisms; in females, it produces too frequent and profuse menstruation. It is indicated where there is profound melancholy with suicidal tendency; in congestion of the liver or testicles; also in scrofulous and syphilitico-mercurial affections. Bone-pains, with nodes, exostosis, with tenderness of the periostium.

Acid Benzoicum.—Benzoic acid, through the spinal nervous system, acts upon the urinary organs, joints, and fibrous tissues of the body. In cases of rheumatism and gout, where the urine is very fetid, it acts well. It rapidly diminishes uric acid in the blood. In enuresis and irritable bladder I have found it a precious remedy, acting quickly.

Acid Cilycilicum—Salicylic Acid.—Salicylic acid, and especially the salicylate of soda, acts almost as an absolute specific in rheumatism, acute or chronic. It is about as near a specific in rheumatism as quinine is in chills and fever. From 3 to 5 grains is about the dose. In dyspepsia, with great flatulence, salicylic acid has but few equals. It is a valuable local remedy in cases of old, indolent ulcers, sprinkled on. It is also valuable for fetid otorrhœa.

Baptisia—Wild Indigo.—This acts through the cerebro-spinal

nervous system; first, as an antiseptic in typhoid fever, diphtheria and other septic conditions. It is a valuable remedy for dysentery where the stools are offensive or septic.

Baryta Carbonica—Carbonate of Baryta.—Through the organic nervous system baryta acts upon the lymphatic nervous system. It is valuable for enlarged tonsils in scrofulous children. It is also of great value in induration of other glands. It is a remedy for hoarseness and aphonia, with relaxation of the muscular structure of the throat.

Belladonna—Deadly Nightshade.—Through the vaso-motor nervous system belladonna acts upon the coats of capillaries. It also stimulates the respiratory center. It is indicated where there is furious delirium, before plastic effusion sets in. Where the face is flushed, and eyes red, belladonna is indicated; also in typhoid conditions where there are muttering delirium. Sleeplessness, restlessness, it is indicated. In vertigo we have in it a very certain remedy; it also acts well in many cases of epilepsy, given in doses of 4 to 5 gtts. at night. In convulsions of children it should not be forgotten. In neuralgia of the heart and face, where the face is flushed, this is a very positive remedy. It directly contracts the coats of the capillaries. In all those diseases that affect the vaso-motor nerves belladonna is the remedy; it is also valuable in many diseases where there is hyperæsthesia. In redness of the eyes, and contracted pupils, in any disease, one or two doses of belladonna will be of material utility; 3 to 5 gtts. is sufficient.

Boracic Acid, and Biborate of Soda.--Through the organic nervous system biborate of soda acts well on the mucous membranes in all apthous affections; it also stimulates the menstrual function, and, locally applied, it is a mild, but active, antiseptic. It is an efficient remedy for acid stomach, rendering the blood alkaline; hence it is a good addition to salicylic acid in rheumatism. Boracic acid is one of our most powerful antiseptics, and applicable wherever a mild antiseptic is called for. It is a remedy for most skin affections, especially when they suppurate and discharge offensive pus. It is also a good application to fresh cuts, bruises, and abraisions. An injection of a saturated solution acts well in gonorrhœa and gleet.

Bryonia Alba.—The white tetter berry acts through the cerebro-spinal systems of nerves. In rheumatoid inflammations it acts efficiently, especially when confined to the muscular system. Dose, 3 to 5 gtts.

HEMATURIA.

BY J. W. SHAW, M. D., GRAVEL RIDGE, ARK.

We find, in referring to works upon the practice of medicine, that hematuria may be produced by a variety of causes; among which may be named injuries, inflammatory conditions of the organs engaged in the secretion and elimination of the urine; the presence of calculi in the kidneys, and during their passage through the urinary tract. It is also, at times, present in typhoid and other fevers which owe their origin to a specific poison in the blood. In such fevers there is a considerable destructive process going on in the vital fluid, which condition allows the corpuscles to pass through the secreting structure of the kidneys, thereby constituting that feature which is designated as hematuria. This condition is present in yellow fever, owing to a general dissolution of the blood, and a passive renal hemorrhage sometimes as a precedent of Bright's disease of the kidneys; and we also see it in those inveterate cases of malarial diseases when the patient becomes very much debilitated through the prolonged influence of marsh miasmata upon the blood, and the derangements it gives to organs engaged in its elaboration. In the malarial form, the patient has been troubled with chills for some time, stopping them at times, but they will eventually return; finally the patient has a well marked chill of longer duration, followed by considerable febrile reaction. The head is hot, pupils contracted, pulse small and frequent, tongue small and pointed, red at tip and edges; papilla at tip prominent bases, median portion of tongue yellowish color, tinged with green, ranging from this to dull bluish color; complexion sallow, or yellow, with tinge of green; persistent vomiting of yellow or dark green material, which is composed mostly of bile, or it is a darker color, showing great depravation of the blood; sharp constrictive pain in region of the kidney; frequent micturition, the urine causing considerable pain during its passage, the color varying from a dark red to a purplish hue, with sometimes coagula in it, looking more like blackberry juice than anything I can compare it to.

The remedies which I have found to exert an eminently beneficial influence in this feature, which appears so alarming to both the patient and his friends, is as follows—in which I do not claim to advance any ideas which are new to readers of medical journals of to-day, but which I have found to be very efficient:

To reduce the excessive irritability of the stomach is the first object to be attained, before you can expect any benefit from other remedies, for which I have used 5-grain doses of subnit. bismut with 1 grain of Dover's powder every half hour, alternated with hydrocyanic acid, gtts. v to x; water, 4 ℥; dose, teaspoonful. Creasote in 1 gtt. doses is good; also the use of hot water internally, and the local application of mustard plaster to the epigastrium. For the febrile symptoms, the administration of ½ gtt. doses of tr. aconite, with ¼ gtt. of tr. veratrum, and v to x gtts. of gelseminum, every hour, will soon reduce the temperature and pulse to very near the normal standard; the skin will become soft and moist, and pulse full and open, with an inclination to drosiness, with slightly dilated pupils, pain in back of dull aching character. I now give a teaspoonful of fluid extract of jalap and senna to clear out the intestines, if they have been constipated. For the hemorrhagic condition gallic acid, in v to x-grain doses, every half hour for two hours, then every hour in alternation with iii to v gtts. doses of fluid extract of ergot every hour, as soon as you can get them retained on the stomach. With the use of an inunction of quinine 1 ʒ, to 1 ℥ of lard, every two hours, will bring about a marked improvement in the character of the urine in eight or ten hours. Now give v-gtts. doses of ol. engeron in a little cinnamon water, every two hours, alternated with v-grain doses of gallic acid, every two hours; quinine in ii to v-grain doses, every three hours, and in from six to ten hours the urine will be perfectly normal. As a restorative treatment, x-gtt. doses of tincture ferri clondi, in one-third glass of water, three times daily, in alternation with—℞. Tr. cupri acetas, xx gtts.; water, 4 ℥; dose, teaspoonful three times daily. Continuing quinine in ii to iii-grain doses every three hours will exert a marked benefit in the course of a few days. For the yellow appearance of the skin and eyes, I know of no remedies that will exert more benefit than the tincture of chyonanthus in v to xx-gtts. doses, four times daily, in alternation with tincture hydrangea in doses of x gtts. to ʒ ss, three times daily. Chelidonium in v to x-gtts doses, alternated with x-grain doses of podophyllin, will exert marked influence in some cases. Tincture cantharides and turpentine will benefit the hemorrhagic condition in some cases. The hamamelis and rhus aromatica I have never tried, not having had an opportunity to obtain them. If much prostration is present—as sometimes is the case—the use of alcoholic stimulants

with carb. of ammonia, or camphor externally, and mustard friction to extremities and surface of body, will be necessary in connection with your remedies for the hematuria.

Nourishment should be given frequently to support the patient's strength. Tincture of hydrastis and tincture of euonymus, x gtts. of the former, and iv to x gtts. of the latter, should also be given three or four times a day, to improve the appetite and to overcome malarial influence, and improve that condition of the system which usually results after the prolonged use of quinine in these inveterate cases of ague.

THIRD ANNUAL SESSION OF THE ECLECTIC MEDICAL ASSOCIATION OF ALABAMA.

The third annual meeting of the Alabama Eclectic Medical Association convened in the City Hall at 10:30 a. m. President Thornton called the house to order and made his annual address. The speech was a forcible presentation of the status of Eclecticism, its hopes, trials and triumphs.

Dr. John H. Henry, of this city, was introduced, and in a few well chosen words expressed his pleasure in meeting the Association, welcoming them to the city and wishing them a successful session.

The minutes of the last annual meeting were read and approved.

The roll of membership was revised and the following names added to it:

W. B. Arrington, M. D., Hurtsboro, and D. B. Williams, M. D., Opelika, Ala., were raised to the rank of active members. Howard Lamar and H. Y. Perry, Auburn, Ala., were elected junior members.

Dr. John H. Henry, of Montgomery, and Prof. Wm. M. Durham, M. D., of the Georgia College of Eclectic Medicine and Surgery, were elected honorary members.

At the request of the Association, Dr. John Henry gave an explanation of the Homœopathic doctrine and practice.

Considerable time was consumed in hearing the reports of sections, as follows:

Materia Medica—J. N. Gradick, J. D. Arrington.

Obstetrics—Miss Dr. Abbott, F. H. Standifer.

Surgery—F. W. Abbott, D. B. Williams.

Theory and Practice—J. W. R. Williams, W. H. Lamar, M. L. Fielder.

The following papers deserve special mention: Dr. Gradick, "Physiological Action of Medicine;" Dr. Lamar, "Chloroform;" Dr. Fisk, "Peculiar Forms of Malarial Fever;" Dr. Henry, "Menopause;" Dr. King, "Treatment of Hemorrhoidal Diseases."

Dr. Jerome Cochran, senior censor of Allopathic Medical Association of Alabama, was introduced to the Assembly, and in an informal discussion of an hour and a half urged the advisability of this Association relinquishing its separate existence and becoming a part and parcel of "his" association.

Quite a lengthy discussion ensued, and many points of interest were drawn out. Dr. Cochran admitted that the perfect administration of the law, as it now stands, would ultimate in the complete destruction of both the Homœopathic and Eclectic Schools of medicine.

At 1:40 p. m., on motion of Dr. Arrington, the Association adjourned to meet at 3:30 p. m.

AFTERNOON SESSION.

At 3:30 prompt, the meeting was called to order by the President.

On motion, Dr. Lamar was requested to submit his paper on "Chloroform," to the National Eclectic Medical Association at its next session.

On motion of Dr. J. W. R. Williams, the regular order of business was suspended and "Medical Legislation," was made the special order of the hour.

Dr. Durham suggested that the Association be incorporated by a special act of the Legislature, with powers to examine and license Eclectic physicians proposing to practice in Alabama.

On motion, President Thornton, and Drs. J. W. R. Williams and W. H. Lamar were appointed to secure a charter from the next Legislature.

It was also made their duty to wait upon the Governor, state the grievances of Eclectics, and pray him to call attention, in his message to the Legislature, to the inequalities of the law.

Dr. Williams, for the information of the meeting, read the subjoined resolution, which was adopted by the Allopathic Medical Association recently in session at Anniston:

"Forasmuch as that class of physicians who practice what is

known as the Eclectic system of medicine, are in substantial agreement with the regular medical profession in all matters relating to the theory and practice of medicine, all graduates of Eclectic Medical Colleges in good standing are declared to be physicians within the meaning and intent of the law to regulate the practice of medicine in Alabama, and must be so regarded and treated by all authorized boards of medical examiners in the State."

The discussion elicited the fact that by the above resolution the Allopathic fraternity of Alabama tacitly confess the right of the Eclectics to a separate organic existence, while at the same time it was an attempt to surreptitiously prevent the consummation of that right.

The Association, therefore, feels constrained to embody its sentiments in the following:

"*Resolved*, That the thanks of this Association are due the Alabama Legislature, No. 2, which held its late session in Anniston, in its modification of the medical law; first, for the unmitigated misstatement of its preamble; secondly, for the opening of the back doors of the legalized medical church of the commonwealth for the stultification and absorption of the Eclectics in the body of the act; and lastly, for the contemptible compliment paid to all such in the kitchen fare and social ostracism to which they are consigned for a term of probation not mentioned in that farcical act."

Dr. Durham, in behalf of the Atlanta Eclectics, extended a hearty invitation to all Alabama Eclectics to attend the meeting of the National Eclectic Association to be held in Atlanta, Ga., June 16th, 17th and 18th, 1886.

Drs. D. B. Williams and W. H. Lamar were appointed a committee to look after the interests of the National in Alabama.

The following were appointed as delegates to the National: Drs. R. J. Thornton, J. W. R. Williams, D. N. Moxley, W. H. Lamar, Miss Lizzie Abbott, J. D. Arrington, W. B. King, J. N. Gradick, R. K. Horne, W. R. Chapman, E. F. Dyer, D. B. Williams, M. L. Tilder, F. A. Martin, and W. B. Arrington. Alternates, Hicks Martin, F. W. Abbott, D. B. Ford, and R. S. Jones.

Several reports and communications of minor importance were submitted.

The present officers were re-elected for the ensuing year:

President—R. J. Thornton, M. D., of Tuskegee.

First Vice-President—J. W. R. Williams, M. D., of Opelika.

Second Vice President—D. N. Moxley, M. D., of Auburn.

Assistant Secretary and Treasurer—D. B. Williams. M. D., Opelika.

Corresponding Secretary—Miss Dr. Abbott, Bremen.

Montgomery was selected as the next place of meeting; time first Wednesday in May, 1887.

The following resolutions of thanks were adopted:

Resolved, That the thanks of this Association are due, and are hereby tendered, to Hon. Mr. Lowry, member of Congress, for his bill offered in Congress, procuring equal rights and privileges for physicians of all schools of medicine in the United States.

Resolved, That a copy of these resolutions be sent the Hon. Mr. Lowry, and also that a copy be sent each of the representatives from Alabama, with the request that they support the bill.

Resolved, That the thanks of this Association are due, and hereby tendered, to Mayor Reese for the use of the City Hall.

Resolved, That the thanks of this Association are hereby tendered to Dr. J. H. Henry for favors and courtesies rendered to the Association.

Resolved, That the thanks of this Association are tendered to the press of the city for favors shown.

ABSTRACTS.

TESTING URINE FOR ALBUMEN, in supected cases of diseased kidneys, is made easy by the following procedure (given in an article on "Acute desquamative or tubular Nephritis," by G. G. Gore, M. D., in the California Medical Journal. In suspected cases the urine should be carefully examined for albumen by one or more of the following methods: If the urine is turbid it should be filtered, and if not distinctly acid (which it usually is, however), it should be acidulated by means of a few drops of acetic acid; then heat in a test tube, and if turbidity results it is owing to either albumen or earthy phosphates; add a little nitric acid, if phosphates they are dissolved and the liquid becomes clear, but if albumen it becomes, if anything, more apparent. Nitric acid coagulates also albumen without the aid of heat, but as it exerts a similar influence on mucus, which last is not affected

by the degree of heat ordinarily used it is better to apply both tests in the order mentioned. Alcohol also in equal volume of urine will coagulate albumen, as will a solution of potass. ferrocyan. acidulated with acetic acid; so it is better to use several or all these tests than to rely on one alone.

Dr. Roberts, of England, claims for pieric acid in saturated solution, added carefully, great reliability in detecting albumen in urine, even when present in small quantity. Generally, we have all that can be desired by boiling and cold nitric acid added to cold urine very positive and reliable tests for albumen in urine. Patients who have recently been taking cubebs or copaiba produce urine that will give a decided precipitate on boiling, which confuses the nature of the case, and must be borne in mind.—ED.

HYDROCEPHALUS, SIMPLE TREATMENT OF.—Head of monstrous size, skin cold and flabby, eyes bulging, countenance pale, etc., the following prescription prescribed: R. Fluid extract belladonna, gtt. v; fluid extract asclepias tub.; tincture capsic, aa gtt. xx; aquæ, ʒ iv. M. Sig. teaspoonful every hour. Next morning much improved; skin warm and moist, scalp covered with moisture, and more yielding to the touch. Discontinued the belladonna and increased asclepias tub. to ʒss. Marked improvement was noticed at each visit, and in one week the head was reduced to natural size, and functions normal, and continued the same up to the time the family left. Had I used the remedies recommended in such cases—as arsenic, sulph. iron, phos., etc., I would have lost my case.—F. P. MITCHELL, in California Medical Journal.

CRUPOUS PNEUMONIA.—Dr. C. R. Illingworth prescribes salicylate of soda with aromatic spirits of ammonia in croupous pneumonia of children. This practice is based on the theory that we have to deal in the disease with stasis of the blood in the pulmonary capillaries due to increase febrin elements of that fluid. This medicament, it is claimed, renders the blood more fluid and relieves the congested central organs, and restores the peripheral circulation of stasis, and prevents extensive effusion of plastic lymph through the overladened and virtually prostrated capillaries, into the pulmonary air cells.

LOCAL IRRITATIONS AS A CAUSE OF TUBERCULOSIS.—The average duration of life among the dry-grinders of forks is 29 years; of razor-grinders, 31 years; edge-tool-grinders, 32 years;

knife and file-grinders, 35 years; and saw and sickle-grinders, 38 years. The cause of this excessive mortality is apparent. In every hundred sick among the needle-makers, 62 in a 100 are consumptive; and taking the steel-grinders all round, rather over 40 in the 100 are consumptive. Consumption among workers in copper and lead is the predominant disease; and in every 100 lithographers, for instance—workers in copper—one half nearly are consumptive.

But notoriously overtopping all the other dusty occupations in their effects upon life and health are those of the grindstone-makers, flint-cutters and glass polishers. The condition under which their work is carried on is in the highest degree favorable to the production of pulmonary diseases. They work in an atmosphere loaded with sharp spiculæ which lacerate the lungs, and quickly induce consumptive disease. Every grindstone-maker is cut down by it at or soon after the age of 24. Hardly one escapes. The flint-cutter and glass-polisher have each 80 deaths per 100 sick of consumption, and their average life is under thirty years. Again, the stone-cutters terminate their aveage life at the age of 36—36 in every 100 sick being consumptive. Were we to enter one of the busy workshops of the steel-workers, and for a time, amid the turmoil of machinery, attempt to breathe its stifling atmosphere, charged with minutely pulverized dust, emitted by hundreds of wheels, we would have a practical experience of the causes why few, if even one, of all the workers there will ever reach their fortieth year.—*Albany Sunday Press.*

APOMORPHIA IN OBSTINATE NEUROSES.—Apomorphia, for a long time used only as an emetic, has recently been successfully applied to the treatment of obstinate neuroses (*Revue Medicale*). In chorea in a girl of thirteen, two injections, each about one-twenty-fifth grain, were given daily for three weeks, when the patient was discharged, cured. Another girl of the same age, subject to epileptiform convulsions, was given two injections of from one-twentieth to one tenth grain, each day, the treatment being kept up for thirty-eight days and resulting in a complete cure. A case of hiccough recurring from thirty to forty times a minute, and which was fast exhausting the patient, was cured by two hypodermic injections. Morphia, atropia, and other drugs, had been tried without effect, as had also electrization of the phrenic.—*National Druggist.*

SACCHARINI.—Professor Maurice Perkins, of Union College, Schenectady, sends us the following excerpt regarding "saccharini": A substance which has been for some few years known to specialists bids fair, through later improvements, to be furnished so cheaply that it will enter the market as a commercial product.

From coal tar C. Fahlbery has made a substance possessing great sweetening powers—far more intense than the best cane sugar. The name given to it by the discoverer is "saccharini." It is benzol sulphionic imide ($C_6 H_4 CO SO. NH$), a white powder, not very soluble in water, but easily in alcohol. One part will impart a very sweet taste to 10,000 of water. It is about 230 times sweeter than the best cane sugar. It is not decomposed in the human body, but is eliminated without undergoing any change. When taken into the system in such quantities as to display its sweetening properties, it has no injurious effects whatever. Five grammes a day given to dogs produced no ill effects. This would be equal to two and a quarter pounds of sugar—a far greater quantity than any one would be likely to take in one day. Diabetic patients have now been treated for several months in one of the principal hospitals in Berlin without suffering any inconveience, thus allowing diabetic patients to enjoy food that has heretofore been denied them. It may be applied to medicinal preparations where sugar is not permissible. A little added to glucose imparts to it all the sweetness of cane sugar—say one part in 1,000–2,000. Raspberry syrup is made with this as the sweetening principle.—*Albany Medical Journal.*

THE ANTIPHLOGISTIC ACTION OF MENTHOL.—Dr. Selwyn A. Russell, of Albany, N. Y., [A.M.C., '77], writes to the *Medical Record*, November 21, 1885, to call attention to the use of menthol as an antiphlogistic and anodyne remedy in superficial inflammations, in which, he says, its effects are truly remarkable. "My discovery of its value in such conditions was quite accidental; a patient who was suffering from acute aural perichondritis, failing to obtain relief from the usual anodyne applications, bethought himself of menthol, which he applied by means of the ordinary pencil; the relief from pain was immediate, and from that time, to my surprise, the inflammation quickly subsided. I have since made frequent use of it and I believe inflammations have aborted, which, without it, would have ended in abscess; and in addition the pain, itching, heat and swelling

have been considerably reduced. I have used the etheral solution (alcohol is also a good solvent) in the strength from ten to fifty per cent., applying it by means of a camel's-hair pencil. The applications may be made two or three times a day, or more or less frequently according to the indications. A solution in one of the fixed oils may be used on membranes. I have observed the good effects of menthol more especially in boils, carbuncles, excessive inflammation following vaccination, etc. The employment of this substance in superficial neuralgias, for its anodyne effect alone, is often very satisfactory, but its use in this way has been noticed and written upon by others."—*Therapeutic Gazette.*

LOCAL ANÆSTHESIA by means of hypodermic injection of the salts of cocaine is becoming extensively practiced preparatory to making surgical operations on various parts of the body. It has been shown that if the local circulation of the part to be operated on be in any convenient way arrested at the time of using the injection, prolongs and intensifies the local anæsthetic action of the medicament. If the injection is made a few minutes before exsanguination and the application of the tourniquet, a sufficient amount of saturation of the tissues is obtained to expose a large number of nerve filament to the influence of the anæsthetic. It is essential in the use of this method to retard or stop the circulation of the affected part during the period required for the anæsthesia. In different portions of the body different forms of compression are called for. By this method anæsthesia can be prolonged for any length of time with comparative small quantities of cocoa. We abstract from Peoria Medical Monthly.

PILOCARPIN INJECTIONS.—Dr. Humbert Molliere (says the British Medical Journal) has successfully treated double pneumonia with pilocarpin. The patient, exhausted by dysentery and albuminuria, was attacked with pneumonia in both lungs, and the intestinal disturbance was greatly aggravated. A centigramme (about one seventh of a grain) of pilocarpin was injected; the respiratory movements fell from 48 a minute to 24, and dyspnœa was much relieved; four hours later a fresh injection was made, and was repeated the next morning; each injection was followed by profuse sweats and salivation, and dyspnœa was greatly relieved. The patient rapidly recovered. In administering pilocarpin, Dr Molliere was guided by former experience. An el-

derly man with uremia, accompanied with dyspnœa and delirium, who seemed dying, was greatly relieved, and ultimately cured, by a similar treatment. Dr. Molliere describes another case: A young woman, with a comatose form of uremia and renal lesion, following a cardiac affection, was freed from the comatose condition by injections of pilocarpin.

BAD BITTERS MADE FROM WOOD.—The manufacture of alcohol from wood has increased rapidly within a few years, and it is said to be used largely for patent bitters, ginger extracts, and other alcoholic compounds whose strong flavor makes it unnecessary to use a better quality of spirits. Wood alcohol is a dangerous product, and sometimes gives rise to serious disturbances of the brain and nervous system.

OPERATION FOR VARICOCELE.—Prof. Mayo Robson, Leeds, (says the Medical World) champions the treatment of varicocele by complete excision of the bundle of enlarged veins, with due antiseptic precautions. He has found in his experience that hydrocele, orchitis, or other trouble from the disturbed circulation seldom or never follows the operation. The spermatic cord should be held between the fingers, over the varicocele and the vas deferens allowed to slip away, leaving the enlarged veins in the grasp. A vertical incision is now made down to the veins, the fascia is separated from them, and a double catgut ligature applied and tied about an inch apart, and the varicocele completely excised. No bleeding occurs, as a rule. A catgut drain may be left in, but is not indispensable. The wound is dressed with carbolized gauze and a pad of salicylic wool or silk.

HOW WONDERFULLY WE ARE MADE!—According to Professor Huxley's table, a full-grown man should weigh 154 pounds, made up thus: Muscles and their appurtenances, 68 pounds; bony skeleton, 24 pounds; integument, 10½ pounds; fat, 28 pounds; brain, 3 pounds; viscera of thorax, 3½ pounds; abdominal viscera, 11 pounds; blood, which would drain the body, 7 pounds. He should consume, per diem, beefsteak, 5,000 grains; bread, 6,000 grains; milk, 7,000 grains; potatoes, 3,000 grains; butter, 600 grains; water, 22,900 grains. His heart should beat 75 times per minute; he should breathe 15 times per minute. In 24 hours he would vitiate 1,750 cubic feet of air to the extent of 1 per cent. He would throw off by the skin 18 ounces of wa-

ter, 400 grains of solid matter, and 400 grains of carbonic acid every 24 hours, the total loss in that period of time amounting to 6 pounds of water, and over 2 pounds of other matter.

TREATMENT OF PNEUMONIA OF INFANTS.—I arrange two glasses, into one of these, for a child a year old, I would drop 10 drops of the tincture of aconite, and 6 drops of fluid extract of belladonna. Into the other I would drop 8 or 10 drops each of tincture of bryonia and ipecac. To each glass I would add 16 teaspoonfuls of water. If the temperature and pulse were not too high, I would give a teaspoonful of these, alternately, every hour. If temperature is high, with pulse 130 or over, and rapid respiration, I would give a smaller dose, and alternate every half hour. Over the chest, for a child under three years old, a cloth should be applied well spread with lard, and this slightly sprinkled with the compound emetic powder of the dispensatory. For a child above three years old, a muslin jacket is more effectual, and not too heavy. If there is persistency of high temperature, the aconite may be added to the second glass also. If there is restlessness, 4 or 5 drops of the fluid extract of hyoscyamus may be added to the bryonia and ipecac instead of aconite.—*Chicago Medical Times.*

ELECTRICITY FOR NEURALGIA.—M. Onimus, of Switzerland, says: The success of electricity in the treatment of neuralgia is influenced by the direction of the current, the downward current being found to have a more sedative action than the ascending. Exceptions to this rule are nearly always due to faulty arrangements of the apparatus, or errors in the diagnosis. Frequently, for example, pains in the lower limbs are treated for sciatica, which are really originated by commencing scleroses, or even by cerebral affections.

OLEOZE.—One part each of oils of lavender, cloves, cinnamon, thyme, citron, mace, and orange flowers, three parts balsam Peru, and two hundred and forty parts of spirits. One drachm of this, added to two ounces of simple syrup will disguise the taste of one drachm of quinine.

OIL OF RED SANDAL WOOD is reported as efficient in the treatment of orchitis and rheumatism resulting from gonorrhœa as in the original disease. Ten to 20 drops are given in capsules every three hours.

NERVE SUTURING.—Dr. Michael Beverly, of Norwich, England, has recently operated with success in a case where the ulnar nerve had been severed by a broken bottle, four months before the operation. A dense cicatrix over the nerve marked the point where the injury had taken place, one and one-half inches above the wrist. There was atrophy of the parts applied by the nerve, and intense pain when the little and ring fingers were moved.

Under carbolic spray he dissected and found the upper part of the trunk of the ulnar nerve. This was traced down into the tendon of the *flexor carpi ulnaris* with which it was intimately adherent, and accounted for the intense suffering caused by movements of the little and ring fingers. He then dissected until he found the long portion of the ulnar trunk which had retracted and lay just above the annular ligaments. A clean section was made at the end of each part of the nerve trunk and the two fresh surfaces were united by two catgut sutures. The arm was placed on a splint and the hand kept in a flexed position. The wound healed by first intention. Sensation gradually returned into the parts from which it was absent, and it is now, two months after the operation, nearly restored. There is very little difference now between the two hands in either sensation or motion.—*Boston Med. and Surg.*

A FEW THINGS IN WATER.—

But if from man's vile arts I flee,
And drink pure water from the lea,
I gulp down infusoriæ,
And quarts of raw bacteriæ,
And hideous rotatoriæ,
And wriggling polygastricæ,
And slimy diatomaceæ,
And hard-shelled ophryocercinæ,
And double-barrelled kolpodæ,
Non-loricated amœbæ,
And various animalculæ,
Of middle, high and low degree,
For nature just beats all creation
In multiplied adulteration.

—*American Druggist.*

EDITORIAL.

EDITORIAL BREVITIES.

LENOLIN or wool fat, is the coming base for ointments and salves. It is said never to become rancid.

SCANTY MENSTRUATION.—Jaborandi is recommended in 10 to 15 drops, repeated three or four times a day.

CEREBRAL EMBOLISM, causing right hemiplegia, was treated successfully by Professor DeCosta with digitalis, with the view of restoring collateral circulation.

PUCK says a doctor specialist of St. Louis cures the alcohol habit with opium; then he cures the opium habit with cocoa. Now Æsculapius is in search of a cocoa antidote.

PLACENTA PREVA.—The safest treatment, all things considered, to mother and infant, is the old one: plug the vagina carefuily and systematically and await events.

SICK HEADACHE, the New England Medical Monthly says, is frequently successfully treated with the following: ℞. Inspirated ox gall, 1 gr.; oil gaultheria, 1 gtt.; administered in capsule every hour till relief is obtained.

LLOYD'S HYDRASTIS is claimed by Dr. W. C. Cooper to far exceed in therapeutic efficiency any preparation he has ever seen. He says it is incomparably superior to any of the colored preparations.

CUPREA BARK is said, on the authority of the Indian Medical Gazette, a new source of quinine which can be procured more cheaply than cinchona bark. This is one of the causes of cheap quinine.

FUMIS, when to tie it, is the question. Most men of sense wait till the cord ceases to pulsate, for then the blood in the placenta is pumped nearly out by the infants heart and is in its system. This is sufficint reason why we should not tie the cord too soon.

DISEASE OF THE KIDNEYS seem to be a prevailing disease with trotting-horse trainers and railroad conductors. The constant jar and vibrations of the vehicle and the cars are the alleged causes. Country doctors who do a deal of buggy riding for many hours per day, and every day, are also victims of kidney disease.

ANÆMIA.—The double salt of iron and sodium, the pyrophosphate, which is highly soluble, unirritating, and the best for hypodermic use as well, is recommended by Professor DeCosta in the treatment of anæmia. Its other advantage is in not producing constipation, which is one of the serious obstacles to the use of iron in many cases.

GEORGE ELIOT said that the women make such a miserable makeshift in having babies that the job should have been confided to the men. Men are generally big fools compared to women; on the whole, however, they know how to shirk a bad job. George Eliot was a spinster, and this is equivalent to being half a man.

WE call the attention of our readers to the new advertisement of Messrs. Sharp & Dohme, to be found on second page of our cover. The preparations of this firm cannot be surpassed in purity and reliability. Correspond with them; you will find them liberal and obliging. Mention this journal, and they will send you their large publication.

CIMICIFUGA is frequently a curative medicament in congestive headaches. Congestion of the nerve centres often cause headache, and those during or preceding the menstrual flow, or follow a debauched whisky bout, or pains in muscles, etc., are all often benefitted by tr. cimicifuga in drop doses. Green root, remember.

INFANTS born before full term are more liable to take on disease than those born at full term, simply because they are vitally depressed and lose animal heat more readily. In all such cases care is needed to keep such infants warm and avoid exposures even of a temporary and trivial kind. These infants should not be washed as soon as born, but must be wrapped in warm woolen cloths and kept in a warm place for many hours, first oiling the body with olive or cotton seed oil to prevent the skin being clogged.

THE GEORGIA STATE ECLECTIC MEDICAL ASSOCIATION will meet at the College, 48 Butler street, Atlanta, at 10 o'clock a.m. sharp, on Tuesday, June 15, 1886. All liberal physicians in the State are invited to attend and participate in its deliberations, and identify themselves with the cause of Progressive Medicine.

THE scientific value of medical legislation is beautifully presented by the following: "M. Pasteur does not perform the operation of inoculation for hydrophobia himself, but relegates it to his assistant, as he is not a graduate in surgery, and the French law punishes by fine any one not holding a diploma who performs any surgical operation. Dr. Granchet is the name of his assistant."

FRED. B. WOOD, M. D., 456 Broadway, Milwaukee, Wis: I have given Peacock's Bromides a *thorough test* and am pleased to state that after an experience of twenty-five years I have never found any remedy which acts so surely as this preparation does. I am sure that in the near future, especially in the treatment of the brain and nerves, it is destined to take the place of the older preparations to the benefit of both physician and patient.

THE BILL to "regulate and license" medical practitioners, which was introduced into the New York State legislature by the Allopaths, and lobbied by them with desperate determination, was defeated, and the defeat was owing altogether to the watchful care and masterly statesmanship of Dr. Filkins. The Allopaths resorted to all manner of tricks and chicanery, and every subterfuge that could be brought to bear to insure success to their scheme, but Dr. Filkins was at last master of the situation.

RAILROAD FARE TO THE NATIONAL is fixed by all the Roads at one and one-third fare. Delegates and others who attend must pay full fare coming to Atlanta, and will receive, on application, from the agent at the starting point a certificate filled up and signed by the agent stating that full fare has been paid to Atlanta. This certificate, when countersigned by the chairman of the local Committee of Arrangements, will entitle the holder to a return ticket on one-third fare. Send to Professor Durham for one of these blank certificates.

THE COUGH PNEUMONIA we think well treated by the tincture of collinsonia. We give 2 to 4 drops every hour. When the first sound of the heart is weak, and the cough troublesome as well, we combine collinsonia with convallaria majalis in equal parts, 3 to 4 drops at a dose, every hour.

BROMIDIA.—Dr. Cofer, of this city, tells us he has used bromidia five years in his practice and likes it so well that he would not try to get along in practice without it. If you are not familiar with any of the preparations of Battle & Co., drop them a card requesting a sample to you free, which they will promptly honor if you mention this journal.

POLYMNIA UVEDALIA is one of our best and most trusty medicaments in orchitis. We give it in doses of 20 to 30 drops in water, every two hours, and apply the tincture diluted with equal parts of tincture of belladonna and water to the inflamed or painful parts. We have found it equally efficacious in inflammation and threatened suppuration of the mammary gland. Last fall we found it equally useful in mumps, in doses of 20 drops of the tincture, which is the only preparation we use.

COCAINE.—Some of its uses, locally applied to the gums of fretful, worrying, teething children, afford almost instant relief. Injected up the rectum, in enema form, it affords cessation of tormena and tenesmus in dysentery and cystitis. Applied to the vaginal mucous membrane, in suppositonis, it affords relief in severe nymphomania and vaginismus. An ointment of it affords relief in pruritus of any part. A solution (5-per cent.) painted over boils and carbuncles affords relief of pain and removes local inflammation. *Vive la Cocoa!*

HEART TONIC, in feeble, quick pulse, albuminurea and renal disease, attended with dropsy, scanty urine, high fever, we order caffine and verat. veride. The first slows and strengthens the heart and increases blood-pressure; the latter exalts the vasomotor centres in a peculiar way—that is, the abdominal vasomotors are relaxed, while those of the muscles are tightened. Under this treatment urine increases in quantity, the extreme acidity is lowered, anasarcal effusions are absorbed, and the activities of secreting and excreting epithelium are heightened.

THE SITUATION IN ALABAMA.

It will be noted in the proceedings of the Eclectic Medical Association of Alabama that the Allopaths are endeavoring to prevail on the Eclectics of that State to abandon their efforts to obtain the repeal of the present outrageous medical laws of that State. Every respectable jurist who has given the law a moment's examination pronounces it outrageously unconstitutional in all its leading features. The indictment of the law before the bar of public opinion by her leading Eclectic physicians has called the attention of the decent people of Alabama to its odious features. In the first place, the law makes the Allopathic State Society a legislative body and clothes it with plenary powers over the medical profession of that State. In the second place, this law utterly ignores Eclectics and Homœopaths in direct terms, and places these physicians before the laws of the State as outlaws, and subjects them to the caprice of the examining and licensing boards created by the Allopathic State Society.

Since the Eclectics of Alabama have organized and cooperated to promote the cause of Liberal Medicine, the success of their endeavors to get that bad law repealed is only a matter of short time. This is so apparent to the Allopaths that they took in the situation and tossed a poverty stricken sop to their competitors, in the hope that this would suffice to quiet down all further efforts to repeal the law. Now, we say, the resolutions passed by the Allopaths at the recent meeting of their State Society, at Anniston, Calhoun County, Ala., are clearly acts of legislation. Only think of it! An irresponsible conclave of Allopathic doctors, clothed with arbitrary and plenary powers over their peers, to make or unmake, to build up or tear down, to reward or punish, just as caprice or prejudice may prompt! Where is there greater tyranny in the world? What Established Church in Europe, or the World as to that, has greater or more arbitrary power? Yet these Allopaths say to us: You have no right to complain, if we will allow you to carry the odious yoke but remove some of the burthen!

The mud god of medicine of Alabama must be dethroned, and surely will be, if the Eclectics of that State maintain the advantages they have already gained in the fight.

COLORLESS HYDRASTIS, a bottle of which was kindly sent us by express, by the manufacturers, Messrs. Parke, Davis & Co.,

of Detroit, Mich., for trial, which we immediately put to the test in the treatment of a case of chronic gastro-duodenal catarrh that had been hanging on hand for several weeks. As is well known, this form of dyspepsia is one of the most difficult to treat. Strange to say, however, this patient, who had been dragging along without making much headway for weeks, commenced to mend rapidly under 30-drop doses, four times a day, of this medicament. She remarked that in three days after commencing the use of the drops she experienced more benefit than from anything else heretofore taken, and steadily went on mending. We have used it in two other cases of chronic gastritis with very gratifying results. As the catarrhal state of the stomach and intestines improves, the constipation also yields. We do not hesitate to say that colorless hydrastis is a valuable addition to our armamentarium. Try it.

MENSTRUATION is a physiological process closely allied to reproduction, in the human female. The bloody discharge from the uterus that recurs every four weeks is one of the results of a general hyperæmia of the uterus, ovaries, and their appendages, that take place on the ripening and rupture of a Graafian follicle and the discharge of one or more ova. Regarding the menstrual discharge, we may say that two views are taken by physiologists as to the meaning that should be attached to the bloody flow. One opinion holds that the mucous membranes of the uterus is, on the recurrence of every menstrual epoch, placed by Nature in the condition best fitted to promote the development, growth, and perfection of a fertilized ovum that may come down to the uterus. As a surgeon pares the edges of parts he wishes to unite by a plastic operation, so Nature "freshens" the uterine mucous membrane that the fertilized ovum may form a union between itself and the uterus, and thus receive its nourishment from the blood of the woman through the new vascular union that is to extend from the uterus to the ovum. Accordingly, the bloody discharge is one of the evidences of the physiological traumatic preparations Nature makes for the wellbeing of the fertilized ovum. If the ovum should *not* be fertilized it perishes at once, and the mucous membrane is then shed and thrown off with the dead ovum. According to the other opinion, menstruation is *the evidence* that the ovum was *not* fertilized, and the hemorrhage is the result of the degeneration of the highly vascularized uterine

mucous membrane that Nature had prepared for the reception and nourishment of the fertilized ovum. According to this theory, the uterus, on the ripening and rupture of a Graafian follicle and discharge of an ovum, becomes highly congested or hyperæmic, just as a gland becomes hyperæmic during functionation. This uterine hyperæmia during the menstrual epoch is for the reception of the fertilized ovum, which, as soon as a lodgement is effected in the uterus commences to develop and grow, and receives nourishment from the congested mucous membrane. Should the ovum *not* be fertilized, the hyperæmic mucous membrane then at once passes on to degeneration; hence the peculiar hemorrhage known as the menstrual flow. According to this view the menstrual flow is an evidence that there is *not* a fertilized ovum in the uterus. We are inclined to the first theory.

A TIMELY SUGGESTION.

The Therapeutic Gazette, in an editorial on "Hydrastis Canadensis," says: "It is gratifying to note the gradual disappearance of the prejudice heretofore entertained in Europe against many new American remedies." In connection with this topic, we consider it appropos to suggest that it was not so much from "prejudice" against many *new* American remedies that prevented European medical men investigating and using these remedies, but, rather, want of information on their valuable therapeutic properties. In the first place, the editor of the Therapeutic Gazette well knows that for many, many years Eclectic physicians were about the first who had used these new American remedies; had written extensively on their highly valuable therapuetic properties, and had done all they reasonably could to bring them to the notice of, and into favor with, the so-called "regular" profession, but to no purpose up to a comparatively recent period. Had European physicians any acquaintance with Eclectic medical literature of the last forty years, they would long ago have obtained the needed information, and thus, what the Therapeutic Gazette pleases to style the "prejudice" of European physicians against American remedies would not have an apparent existence. If any "prejudice against many new American remedies" obtains, that prejudice is really and truly belonging to American Allopaths, or "regulars," who stoutly and persistently refused to take any notice whatever of any and all advancements in medical science that did not originate within

their limited borders. When European physicians become better acquainted with the valuable and extensive literature of the Eclectic medical profession of the United States they will see how much American progress in medicine is due to Eclectic physicians, and how little is justly due American Allopaths.

Dr. Oliver Wendell Holmes, in one of his silly lampoons against Eclectics, likened them to a "half armed militia." There never was a more inappropriate and bigoted shaft hurled against us; for, when we were fully armed and equipped with the best and most valued *armamentarium*, our Allopathic opponents were torturing their patients with mercurials, blisters, *et id genus omne!*

THE INSTINCT OF A SCAVENGER.

Dr. A. W. Achison has published a pamphlet of eighty-two pages, so says the Courier-Record of Texas, on the quacks and quackery of Texas. Dr. Achison, of Denison, Texas, has a decided *penchant* for his kind, and as such deserves what credit the doctrine of evolution will award him.

The bent of Dr. Achison's mind and moral sentiment is evidently of that order that men of elevated sentiment and culture abhor. The circular that he issued to his Allopathic brethren of Texas last winter brands him as a man who has neither honesty, candor nor good sense.

The truth of this is shown in the address of the President of the Allopathic State Society at its recent meeting in Dallas. A man who is unwilling to discriminate between honorable, gentlemanly rivals, and the commonest, meanest, basest charlatan, is essentially belonging to the latter class and no better, nor do sensible, candid men accord him a higher position in their opinion.

There are many honest, honorable, liberal minded men among the Allopaths, we are free to admit.

It is evident that the Allopathic Society of Texas plainly told Dr. Achison that he and his labors are more a damage than benefit to the cause of truth and science.

TUBERCLE—WHAT IS IT? No settled answer yet. The microbe is the largest argument at present. Where the tubercle is there appears the peculiar micrococcus—the bacillas of Koch. The relation these micrococcus bear to tubercle, or tubercle to them, is not known. One party contend the micro are the cause; the

other party deny, claiming them as consequence. All highly vascular tissues and organs, save nerve and muscle, can be the seat of tubercle. Good authorities claim that inflammation is at the bottom of tubercle, and where no inflammation has appeared tubercle cannot be; others claim that the inflammation is secondary to the tuberculous bacillus. Tubercle was or is an exudation. Now, it is the next thing to a new substance—a germ that grows and feeds upon and breaks down tissues by its presence—a canker as it were.

Villimin injected the tuberculous juice into animals and produced the tuberculization of various tissues and organs. This is by inoculation, and as a poison it multiplied and grew, occupying certain tissues, then by general diffusion poisoned the nutritive fluids. The microscope reveals nothing that adds to efficient practical knowledge regarding the nature of tubercle. Experiments, like those of Villimin, and Koch, and Klibs, etc., show us that tubercle is infectious—that is, when introduced in the system in certain ways, it reproduces itself rapidly and destroys tissues. The nature of the affection is that of a fungus from germs. It lives on the tissues as a parasite, yet we are unable to say whether there is tubercle aside from the bacillus.

In our opinion, tubercle is an exudation from devitalized tissues or those impaired in life-force. Animals starved, and kept in dark and damp quarters, soon succumb to tuberclization—that is, the exudation is poured out that forms the nidus of tubercle. Corpuscles that are imbedded in a way so as to be fed in a certain way, finally produce the peculiar hyperplasia and degeneration peculiar to tubercle. All the new light that has been poured out on the subject only serve to confirm us in this view. We are also a believer in the anto-inoculation of the system that culminates in typhoid and other diseases.

PARALDEHYDE, the new hypnotic, is working its way slowly but steadily into professional favor. As a hypnotic, it stands unrivaled on the score of its physiological action on the cerebral arteries. In this particular, it is a true vaso-constrictor of the arterioles of the cerebro-spinal axis especially, it is presumable, of the gray substance; accordingly, the central ganglia are made anæmic, which is the physiological condition of sleep. Paraldehyde is, unlike chloral, not a heart-depressor. As is well known chloral exercises a serious sedative influence on the cardiac gan-

glia, through which influence it impairs the efficiency of the central organ of the circulation, and in this way increases dangers that we seek to avoid in diseases of depression. The only objection to paralchyde is its disagreeable smell and taste, which cause patients to revolt against it. Aside from this, it is *the* hypnotic in the sleeplessness of typhoid and other adynamic states of the system. The following formula is recommended as being more pleasant to the taste: R. Paraldehyde, ʒ ijss; alcohol, ℥ iss; tincture vanilla, ʒ ss; water, ℥ vi. M. Sig. ℥ ss at a dose.

THE presidency of the "International Congress," owing to the death of Prof. Austin Flint, senior, has fallen to the lot of Prof. N. S. Davis, of Chicago. This is just as it should be, for Professor Davis is a typical Allopath of the Midæval order, and is just the man for such a congress as the American Medical Association intends to dish up. Besides this, Professor Davis has written a book on Practice that is essentially Allopathic in all that is typical of old fashion Allopathy, and by which he is recommended as the proper figurehead of the Allopathic school. A cow's tail is not more typical of a cow than is Professor Davis of Allopathy, non-progressiveness and old fogy, you know.

MAMMARY ABSCESS, when threatened, may be aborted by fermenting the breast with a solution of carbonate of ammonia, 1 ounce; carbolic acid, 1 drachm; hot water of 140 to 180° F. Flannel cloths wrung out of this and applied to the organ to cover it completely, and over this a rubber cloth is laid so as to conserve heat and prevent evaporation. Dr. Dodd says it is worth trying, but in the meanwhile he administers drop-doses of tincture of phytolacca in infusion of sage leaves. This is as good treatment, on the average, as a man can adopt.

"ROUGH ON RATS."—This may be the opening line of an Allopathic poem, beginning, "Ye gods, how long," etc., but is not, and is only found in the almanacs, and is also the "head line" of an editorial in our esteemed contemporary the Southern California Practitioner. The history of "Rough on Rats," in this particular case, is about as follows: The physiomedical persuasion lamenting that, that school has no text-books of its own for use in their colleges, say they are consequently, but unfortunately, compelled to use Allopathic text-books. Ah! now comes the

rub, for our esteemed contemporary, with grave humor, and tantalizingly exclaims in the head line over the lamentation, "Rough on Rats!" We looked at it in the mood of a philosopher, and the truth burst on us in such clearness that the "rats" in this case happens to be the unfortunate patients who unfortunately had to run the gauntlet of Allopathic treatment in any shape. It appears so much like Ajax daring the lightning—this "Rough on Rats"—only very much more dangerous.

TILDEN & Co.—This sterling old firm is still in the field, with prospects of many more years of usefulness ahead. Their Elixir Iodo-bromide of Calcium Compound continues to hold its high place in the confidence of practical men.

CARL L. JENSEN'S CRYSTAL PEPSIN.—We call the attention of our readers to the advertisement of this pepsin in this issue of this journal. We can say that experience in the use of this pepsin by the profession in general serves to extend its popularity and maintain its claims to being a true pepsium concentration.

FELLOWS' HYPO PHOS PHITES is used very extensively by physicians in their practice, as a builder and nerve tonic. A very reputable medical friend informed us recently he has used over one gross of Fellows' Hypo-phos phites in his practice during the last year or two. He is not a rotineist or recipe prescriber by any means, but prefers this compound because he is unable to prepare the combination that will give the same uniform satisfaction that Fellows' does. He believes the hypophosphites are the best builders we have in certain classes of diseases.

THE intelligence of the death of Moriah, wife of Dr. George Kirkpatrick, of Lattarp, Ill., has reached us on going to press. Dr. Kirkpatrick is a graduate of the Georgia Eclectic Medical College, Class of 1881. Dr. Kirkpatrick has the sympathies and confidence of his many friends in Atlanta.

PTOMAINES as the cause of disease, seem to be coming to the front. A ptomaine is a poison generated in the process of decomposition of proteids, as is likely to be found in the living as the dead body. We are inclined to regard uric acid and urea as ptomaines, and others of the same nature, but having more highly

toxic properties on the living organism, are generated in the system during the process of life, but in minute quantities, and readily cast off in the excretions. Conditions of impaired depurating energy may obtain in the organism, when at the same time these ptomaines may increase and be retained. The old saw, "in the midst of life we are in death," is true enough, for we have learned that life is only a protracted death-struggle.

MASSAGE cures many diseases by increasing the activity of tissue changes and promoting the removal of effete material.

A GOOD injection: R. Zinc sulph., ʒ ss; boracic acid, ʒ js salicylic acid ʒ ij; fl. ex. belladonna, ʒ j; water, 1 pint. M. Use as an injection, or dressing to inflamed or ulcerated parts.

EXTRACT OF MALT is a valuable remedy in the diarrhœa of infants and children; most of such cases are caused by the injestion of too much-starch or sugar. Attend to the diet in all such cases.

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ORIGINAL COMMUNICATIONS.

THE ANNUAL ADDRESS OF PRESIDENT PIPER, DELIVERED BEFORE THE NATIONAL ECLECTIC MEDICAL ASSOCIATION, ON JUNE 16TH, 1886, AT ATLANTA, GEORGIA.

Ladies and Gentlemen of the Association:

As physicians assembled from all parts of this great country, and the official representatives of progressive medicine, permit me to congratulate you upon the marked progress made in the various departments of the healing art since our last annual convocation. To the physician, the surgeon, the chemist and the mechanic, credit is due for valuable contributions of means pointing toward a more perfect system for the relief of suffering.

Progress is the result of individual effort. In the medical profession each physician, in his own field and sphere, is the author or discoverer of something new and valuable in the profession. It is the aggregation of these individual efforts that constitutes the sum total of our progress and makes each physician a stockholder, as it were, in the general fund of medical knowledge to the extent of his contribution. This Association is the Mecca to which these acquisitions are yearly brought. To this altar each physician brings his offering and receives in return the accumulated contributions of his fellow members. These meetings are also valuable for the opportunity they afford us to meet each other personally and cultivate and strengthen the ties of friendship by a more intimate acquaintance. Other and more important objects, at this time, are to concentrate and unify the Eclectic profession of the whole country and to maintain for it a proper political and legal as well as professional status.

I think it has become apparent to every thoughtful observer that the future of Eclectic medicine depends vitally upon the permanency and integrity of this National Association. Without such an organization Eclectic medicine would lose national identity and Eclectic practitioners would come to be regarded as a species of bushwhackers and Ishmaelites with "their hand against every man and every man's hand against them." Even as it is, with all our organization and the efforts of our ablest and most unselfish men, there is often too much jealousy between those whose interest lies in fraternal co-operation. Strife and discord will weaken and often utterly destroy the noblest cause.

"Mark them that cause divisions," says the great apostle, "and avoid them." The object of this Association, as is asserted in the act of incorporation, is "to maintain organized co-operation between physicians for the purpose of promoting the art and science of medicine and surgery, and the dissemination of beneficial knowledge and an improved practice of medicine." In no sense is it an alliance of selfish and personal interests. All are entitled to its advantages alike. It is a mistake to suppose that certain college enterprises are favored by it as being inside of its charmed circle, while others are ruled out as not possessing that advantage. Yet, loose college management has been made a cause of reproach on our name, and we need to exercise care and caution not to deserve it. I do not mean that Eclectic colleges are inferior, either in their standard of instruction or in their conditions for graduation, to the average college of the Homœopathists or the Old School. I have abundant reason to believe that diploma-selling, graduating upon low-grade professional attainments, and kindred evils, prevail more generally outside than inside the Eclectic ranks. Certainly the Eclectics are the only medical school that sought to correct the practice, whereas the other schools seek assiduously to hide their evil deeds. The cry of "stop thief" is often resorted to by the really guilty to divert attention from themselves. The best protection a qualified and worthy physician can have in this country is the recognition and endorsement of an organized body of qualified and reputable physicians; for so long as medical colleges graduate students deficient in medical education and send them out upon the world with no other evidence of qualification than the possession of a diploma, and as long as ignorance and superstition prevail, and men are found entering the profession

with no higher aim than to make money, so long will quacks be found in abundance.

The essential purpose of this Association is to protect worthy practitioners and promote co-operation between them. It is an association of physicians. Those who practice medicine have front seats and first rights, and private matters come last. We appeal to the practitioner, therefore, to take his place and to give us of the best he has; to let no one overawe him, bluff him off, or in any manner browbeat him.

What a man knows, he knows against the world. "An improved practice can only be established by gathering the knowledge and experience of individuals. Because we depend upon this we are named Eclectic—the *elite* who prove all things and hold fast that which is good." The fullest latitude of view and freedom of action constitute our American birthright. The preamble of the constitution of this Association declares that "the right of doing good transcends all statutory and other enactments, and that the profession of healing may of right be exercised by natural endowments and acquired skill and knowledge."

It is no more a secret art of a privileged order, to be hedged in by penal laws, ethical codes, or other instruments of barbarism and oppression; but is the lawful vocation of citizens like other callings. This is Eclecticism as held by the fathers: Beach, Morrow, the Joneses and John King—our noblest Roman—and their fellows and successors.

That noble and glorious son of Southern soil, the late J. Marion Sims—a world's benefactor—enunciated the Eclectic ethics and code of every honorable man, when he said: "We must educate the medical profession up to a recognition of the higher law, the unwritten code, regulating the intercourse between gentlemen." This is the code that governs in England and France, and is recognized and observed by the other learned professions in this country, and there is no reason why medicine should be an exception.

However, as to the code of the American Medical Association, it is little of our concern. It is their business and they are having quite a lively war over the antiquated barbarism. Many of their best men refuse to be governed by it, and do not hesitate to so express themselves. The editor of the Medical Age, a recognized Allopathic journal, in a lengthy article on the subject, says: "In spite of tenets, the honest promptings of the heart

are coming to be held as the safest guide to conduct, and orthodox churchmen are becoming more and more tolerant of the expressions of such promptings." The changes hinted at are not confined to religious affairs. They are noticeable in the practice of physicians, the inflexible code to which they have subscribed to the contrary, notwithstanding. Since this code was first promulgated there have been great mutations in the relations of physicians to each other and to the public, and methods have adapted themselves thereto. Practices condemned under the code, are now winked at by those occupying front seats in the profession, and the indications are that the time is not far distant when many of the provisions of that instrument will be dead as the blue laws of New England." Criticisms like these are but concessions that the code is not in harmony with modern intelligence, and does not supply the adhesive principle necessary to hold together the *regular* fraternity.

The effort to abrogate the rights of progressive physicians by arbitrary and unconstitutional legislation is still going on in many of the States of this enlightened Republic. It had been supposed that the late civil war had annihilated the doctrine of State Rights. Yet, the legislatures of New York and Pennsylvania have placed enactments on their statute books denying to graduates outside of those States the right to practice medicine unless the dean of some college within their respective borders will endorse their diplomas. Yet, these deans contumaciously refuse to endorse diplomas, if the college conferring them is not in ethical harmony with theirs. Our rights as men and citizens are thus illegally placed in subjection to their selfish caprice.

In other States boards have been created to supervise practitioners and determine who may and who may not practice. Where there are Eclectics in force they have obtained a member or two on such board, and so have been assured a tolerable amount of security; but elsewhere the cloven foot is unmasked. These statutes are framed and administered with the express purpose of making it impossible for an Eclectic to practice, in as much as Eclectics are the men that the Old School fears and hates.

There were similar statutes in the States in the early part of the century. Men were fined and imprisoned who had done no wrong; and in defiance of the Federal Constitution, contracts were declared null. The men in those days arose in their might and compelled the repeal of all these statutes. They staid

repealed, and the people were satisfied. But since the unfortunate civil war the zeal of our people for liberty has declined, and there has been less vigilance. In our legislation, this country has gone backward and the spirit of liberty has been stifled. Yet there exists no reasonable doubt that the statutes restricting men in the practice of medicine is unconstitutional, and every honest court is pretty sure to so declare them.

It might be of interest to inquire who are the instigators of so much medical legislation, and what are the causes which prompt it. The most careful investigation reveals the humiliating fact that every law pertaining to the practice of medicine has had its origin in the medical profession, and when a reason is sought, no better can be found than selfishness. This is often unwittingly revealed in the preamble to the resolutions of a medical society asking the legislature for legal protection from an "overcrowded profession." Which reason they generally try to hide by asserting that doctors are not only too numerous, but too ignorant! Then this coterie of doctors, by resolutions, deliberately brand all other medical men with incompetency, and why? Because they must be protected from having to compete in the practice of medicine with physicians who are their superiors in skill and learning, and who are willing that their success shall be in accordance with their merits. In the medical profession are three prominent characters: First is the practical, energetic self-reliant, honorable and intelligent physician, who asks for and needs no special legislative protection, because he fills the space he occupies, and is always able to protect himself where there is no legal discrimination against him. The second is a species of the genus homo, who occupies position, but not professional space; who arrogantly claims to be *regular*, but fails to succeed along side of his more worthy and better qualified competitor. This is the character who invades legislatures with a whining, sickly series of resolutions asking for a law to restrain the physician with whom he is unable to compete, and create for himself a fictitious professional status.

The third character is very much diversified; he is the selfish and mercenary, whose all-absorbing idea is to get money. He is sometimes the professor, and may be the dean, of a regular medical college, and adds sheckels to his purse by persecuting rival institutions and securing special legal privileges for his own. Sometimes he is the traveling quack, the glib-tongued vender of

"Sagwa" and other nameless cure-alls. We also find him as the sole proprietor of a secret nostrum to which he ascribes the most wonderful healing powers, and, strange to say, this fellow nearly always exhibits the diploma of a *regular* medical college!

These are the characters that are found in the medical profession. Let us be of the first, because they are progressive and honorable. Watch the second, because they seek to destroy us, and avoid the third, because their practices are disreputable, and out of harmony with the conduct of an honorable profession.

It is a notorious fact that the general public has never yet asked for any law to regulate the practice of medicine, and it is also as notorious that the instigators and framers of all these medical laws are the professionally weak, and found only in the Allopathic ranks; therefore resort is had to legislatures for protection in unreasonable and unconstitutional enactments.

On the subject of medical legislation, Dr. Romaine J. Curtiss, in an article in the "Physicians' Magazine," says: "All medical laws violate constitutional law, or at least the ethical basis of law," * * * * * and that "trades-unionism in medical law aims at alleged ignorance in the profession, and seeks to establish a legal or political standard of medical education, and also endeavors to define and establish what the standard shall be. It cannot be denied that the artificial standard so fixed is designed to lessen competition in medicine as a business rather than elevate the standard of medical education. * * * A medical law which is selfishly conceived to benefit any college, or school of physicians, or to lessen competition in the practice of medicine as a business, violates the ethical basis of all law."

In the fourth Article of the Federal Constitution—which all the States voluntarily adopted—are the provisions, "that full faith and credit shall be given in each State to the public acts and records and judicial proceedings of every other State, and that the citizens of each State shall be entitled to all privileges and immunities of citizens in the several States." Plainly the medical statutes are in violation of these provisions.

Again, Article 14 of the Amendments declares: "No State shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any State deprive any person of life, liberty or property without due process of law, *nor to deny to any citizen within its jurisdiction the equal protection of the laws.*" This Article was enacted by a

Congress of Northern men, and forced upon nine States as the express condition of resuming their place in the Union. Now, we demand that they live up to it. The medical statutes against which we protest are notoriously abridgements of privileges and immunities of citizens of the United States, and, more infamously still, they are denials to citizens of the "*equal protection of the laws.* They were devised and framed on purpose to give specific privileges to favored individuals irrespective of merit or intelligence, and to deny to others the equal protection of the laws. While the despotisms of Europe, and even China and Madagascar are becoming more mild and humane, much of the legislation, inspired and dictated by the American Medical Association in many of the States of this free and enlightened Republic, is becoming more barbarous, inhuman and atrocious. These efforts, on the part of the illiberal wing of Old School medicine, to suppress by unconstitutional legislation, a rival with whom they fear to compete, are prompted by a selfish desire to obtain and hold a monopoly of the healing art without reference to qualifications natural or acquired. As Eclectic physicians we ask no legislative protection beyond that which is accorded to all citizens in the pursuit of worthy and honorable callings. We care not for their self-made and arbitrary ethics; but it is our duty, both to ourselves and the public, to protest against, and, if possible, prevent any invidious distinction between rival schools of medical practice. We invite competition, and demand an open field and fair fight, with equality before the law.

Judge Anson Willis, of the District of Columbia, laid down the law (which these medical statutes purposely contravene) in this language: "Every citizen has a vote for the choice of his rulers, and, through his representatives, a voice in making the laws by which he is governed. As to his business or calling he may do that which suits his interests or tastes. He may go when or where he desires; he may stay in a State or leave it without restraint or hindrance. In short, he may do whatever seemeth good to him, provided he does not infringe upon the same rights of others."

The Eclectic practice of medicine is organized subjectively and objectively upon this broad basis of constitutional law, while the self-styled Regular School is in direct and absolute hostility. Rightfully, therefore, is ours the American practice; whereas, its adversaries are exotics, and from their nature and constitution are obnoxious to our Western climate.

Eclectic principles are in perfect accord with the intelligence and liberty-loving instincts of the American people. The failure to secure the passage of an additional penal statute abridging the rights of Eclectic physicians in any State during the past year may be regarded as encouraging for the future.

Notwithstanding a profligate expenditure of money and the most persistent efforts on the part of the Old School organizations, the people, through their representatives, refused to further contaminate their statute books with a single unconstitutional measure of this class. In New York, Ohio, Iowa, Kansas, and of course, in Massachusetts, the barbarous legislation was attempted and failed. The courts of Illinois and Missouri have placed a judicial check upon the usurped authority of their State Medical Boards. And the instant the members of these boards find themselves emasculated of the power to put down rival physicians they seem to lose all zeal for sanitary medicine. There is good reason to hope that the Supreme Court of the United States will yet place us all alike behind the ægis of the Constitution, and so end the struggle forever; else we have the battle to fight in the States to undo the evil work of the past few years, and prevent other acts of like character. For undone it must be, and our statute books must be kept clear of such enormities; otherwise we Eclectics will be physicians without a country.

These facts demonstrate the necessity for this national organization. It is needed to unite the efforts of liberty-loving men, of advancing and progressive men, against medical bigotry and usurpation, and for the permanent establishment of "an improved practice of medicine."

It is needed to maintain the integrity and preserve the identity of medical Eclecticism, and as a protection against the imposition of quackery.

It is needed to protect and encourage legitimate and worthy medical colleges, by giving them its endorsement, and to place its ban of disapproval upon questionable concerns in the hands of unscrupulous persons, where diplomas are sold as common merchandise without reference to professional attainments.

It is needed to proclaim the distinction between the worthy and the unworthy, the qualified and the unqualified. It unites fraternally physicians from all parts of this country, and begets public confidence.

"Malice toward none and charity for all" is emphatically the Eclectic principle. Brotherhood, and not partisan rivalship, is the characteristic of all scientific men. The struggle for mastery is good enough for prize-fighters, but true men never seek to obtain undue advantage over others. We are contending for our rights against the Hessians and Tories of America. We call for your Sumters, Marions, Oglethorpes, Lawrences and your "Hickory" Jacksons to take part with us in the holy war.

We have met to-day in a State whose record in behalf of medical freedom and "equality before the law" has not been tarnished. The conspirators all "fight shy" of Georgia. Her example has been a proud one. No wonder her prosperity is great! Her position as the vanguard of progress is established: her destiny is to lead. It will be her proud office to fill the South with Eclectics. Indeed, from what I see here, it seems as though that work had been well done already. May we hope that when this Association meets again in the South—for it must do so before many years—that every State shall have its Eclectic society in full operation, composed of members recognized and acknowledged everywhere as qualified, honorable and independent physicians.

The session, I hope, will be devoted to business. I do not, by any means, object to having a good time with our friends. We have invaded your soil armed for that very purpose. We will not burn your houses nor waste your fields, but only seek to show you by our burning enthusiasm how much we esteem you. Every social and friendly overture you make we meet you more than half way. We expect to go home with grateful memories of our brethren of the "Sunny South," and for having been here the North henceforth will seem to us less bleak.

The professional work blocked out for the sections will require much diligence. Our advance of the preceding years will be marked by our thoroughness here.

While I deprecate the violent assaults upon our rights as medical practitioners, and advocate the broadest freedom, I would enjoin the nicest care in relation to the men whom we hereafter associate with us. The committee on credentials cannot be too scrupulous. Desirous as we are to increase the membership on our roll, it would be a misfortune to place there any name that we would have cause to desire erased.

The principles of Eclecticism are very broad, as they ought to

be, but the morality should be as circumspect. Especially should we exclude every one engaged in any form of practice or advertising which shall tend to lower the physician in the estimation of the community, or reflect discredit upon his professional associates. This is a fair limitation and one we can afford to live by. We need not be arbitrary or hide-bound, but simply keep ourselves clean-handed. All physicians *ought* to be gentlemen, but members of this Association *must* be.

This organization, as my excellent predecessor forcibly declared, is not a machinery to enable one clique of men to override the rights and obtain the advantage over another; but an organization consecrated to mutual benefit and the public good. Let us in our several spheres of action carry out that sentiment, and illustrate it by our example.

At our last annual meeting steps were taken for the formation of a Mutual Aid Society. The constitution and plan of action were adopted and it was decided to set it in operation when it should obtain a specified number of subscribers. Only a part thus far have been procured. There will be a meeting of the members and I bespeak the addition of enough to set it in active operation. The expense will be inconsiderable and the advantages manifold. The social ties which should unite us will thus be strengthened by another and closer one of common interest. Every Eclectic will thus have a participation in the health and life of the others. And the contribution we will be called upon to make, when the solemn summons shall have been obeyed, will operate effectively to endear our name, our organization, and the Eclective Practice to a large circle of acquaintances; becoming thus a cord interwrought by many personal interests, we shall be found hard to break when a heavy outside strain is made upon us.

I also call your attention to the International Medical Congress which convenes in Washington in May, 1887. Composed, as it no doubt will be, of representative medical men of both Europe and America, it ought to be of much interest and result in great good.

Its appointment to meet with us may be regarded as an honor to our country and a compliment to American physicians.

I am sorry, however, to note that the arrangements for the meeting and the management of its details seem to be in the control of those who manifest a disposition to pervert its objects,

and convert it into a narrow, sectarian affair, to be used as a means to discriminate against physicians not in harmony with the proscriptive ethics of the American Medical Association. It is to be hoped that no such bigotry will prevail, and that the medical profession of this great Republic will be fairy represented in the Congress. All schools of medical practice based upon scientific qualifications should have equal privileges to participate in its councils without restraint or hindrance. I would therefore suggest that you provide officially for a proper representation of this Association in the Congress, and by resolution give such advice to our State and auxiliary societies, as in your judgment may appear best, to promote its objects and secure to American Eclecticism such representation as will enable physicians from abroad to know us as we are, and to learn of our means, our methods and our progress in medical and surgical art.

During the past year we have lost no ground. The colleges in our fellowship have done their work creditably and appear to be prosperous. This is a good cause for rejoicing, for it assures us a goodly number to take to the front when the Great Commander musters the veterans out of service.

The medical journals have sensibly improved in their management, and the Eclectic quality of their literature. The number is less than in former years, but the matter (which meets our wants pretty well) is as abundant and as good as before. The State societies make a fair showing and are not behind former years. We are losing members in the Eastern States, but gaining handsomely in the West and South.

There are twenty-five State societies. The unorganized States are Rhode Island, Deleware, Maryland, Virginia, West Virginia, North Carolina, South Carolina, Florida, Louisiana, Mississippi, Colorado, Nevada and Oregon. With the influence which this meeting will have, I think I am safe in predicting that new organizations will be formed whose representatives will greet us when we hold our next annual meeting.

Progress is the watchword of the hour, and this Association is the acknowledged exponent of progressive medicine in America. Shall it maintain this high position? And shall the Eclectic profession remain in the vanguard of medical improvement, or shall it degenerate, and allow others to occupy its place and reap the fruits of its past labors? The answer to these ques-

tions is with you. The future of Eclectic medicine is in your hands, and depends vitally upon the support you give this National Association. Support and maintain it, and you shall continue as a School of Medicine. Let it go down, and you will disintegrate and lose your National identity. But whatever may become of you and the organization so vital to your interests, the principles you represent will remain. They are as eternal as the everlasting hills, and will be perpetuated under another name and by other hands.

CONSERVATISM IN MEDICINE.

BY M. F. DUMAS, M. D, BALD KNOB, ARK.

[Read before the National Association, at Atlanta, Ga.]

MR. PRESIDENT AND GENTLEMEN: In preparing an article for this occasion, and for your consideration, I have concluded that a few thoughts which would provoke discussion, and outline the fundamental principles of the Eclectic School or system of Medicine, and also the object of our meetings, would be more beneficial than any article which I could prepare on professional topics, which have been elaborated by men whose attainments entitled them to rank far above me. Do not understand me as discouraging original investigation; nor do I propose to disparage the many papers which will be read here upon subjects that have apparently been exhausted, but which will again be presented in shades and colors new and bright to very many of our numbers; nor do I propose to ignore the many illustrations of men in obscure places, who have become leaders in their chosen calling, and through their industry and careful methods have become shining lights. But to the average practitioner, it is not expected that he be a leader, but a follower. Neither do I think it is the object of this Association to mark out new paths, to formulate new ideas for the profession, but to familiarize its members by study and discussion, with the latest and best ideas of the best teachers of all schools, to present before each member our daily experience—our victories and defeats; to receive and give advice; to report anything of interest that may occur in our chosen labors; to strengthen and uphold each other; to sharpen our wits with contact: so that we may steer clear of the rocks and shoals of Materia Medica, and may become more tolerant and liberal, and prove to our enemies and friends that we are in earn-

est, and are truly seeking the greatest light; that we have set up as our standard the great and noble principles of Eclecticism—a rational, sanative, and conservative system of medicine—founded on Anatomy, Physiology, Pathology, special on definite Therapeutics and Common Sense. Above all, we maintain that, having set up such a high standard, we are ready to devote our time, money, and talents to develop it, and to take advantage of every particle of experience that our brethren of any and all schools have to offer.

Although the foundation of the Practice of Medicine is Anatomy, Physiology, Therapeutics, etc., they are only the foundation, and the superstructure has been raised by infinite toil and hard earned experience. For one hundred years, or more, the Eclectics have been experimenting, and studying therapeutics from all schools--each experimentor taking for his starting point the recorded experience of those who have gone before, culling out and appropriating all that which was found to be the best, and discarding that which was found to be injurious and fallacious—separating the wheat from the chaff—besides originating and introducing many good and valuable means and remedies; always having as our guiding light the motto, *Vires vitales sustinerer.* Sustain the vital forces, conserve Nature, avoiding drastic cathartics, drastic emetics, drastic diaphoretics, drastic diuretics, mercurials, antimony, blood-letting, blisters, and all other harsh medication calculated to depress the vital forces, the life thereof. Thus has the only true medical system (Eclectic) grown from the cradle, through storms, mists, persecutions, poverty, and slander, on to a powerful and beneficial system—the only true one—absorbing all that experience proved to be natural, rational, and beneficial, and rejecting the dogmatic, superstitious, speculative imaginations and fallacies of all other schools and sects. On this platform, under these colors and principles, I have labored and fought for thirty years, and intend to labor for, write for, talk for, and fight for until "Gabriel toots his horn and calls his child home."

Now, in order to be a true physician, we are compelled to be an Eclectic, and cannot afford to accept the *ipse dixit* of any exclusive school or man for our guide. We must study, reason, digest, and assimilate, and *test*, TEST all things; then we can bear witness, and not until then. He would be a bold man who would voluntarily accept and practice some pet hobby some med-

ical crank has promulgated from the "housetops," before thoroughly testing it. He must be a bold man who would voluntarily throw away the united experience of years, for some fascinating hobby of Koch or Pasteur, or some other "crank," in order to become popular. It is true, that the teachings and experience of the great masters are the common ground upon which we all must meet, and they furnish to us the seed which we are to sow, test and cultivate. They are the preliminary landmarks, and, by studying them carefully and thoroughly, we have a thorough knowledge of those precepts which are approved; and neither the conscience nor the common law hold a man guiltless who may neglect any opportunity to familiarize himself with those teachings. But he must not stop here; he must continue to study and investigate the teachings of each and every school; otherwise he is no Eclectic, and will, if he neglets this, fall behind and follow some rut. It is absolutely necessary for a physician to read, and not only to read but to read with care all the latest text-books and journals of all schools, especially those of the Homœopathists and of the so called, *self-constituted* "Regulars;" otherwise, how is he competent to "choose the best from all sources?" Medical Jurisprudence informs us that "A careful consideration of the foregoing observations will show that the degree of learning and skill which the physician and surgeon holds himself out to possess is that degree which is ordinarily possessed by the profession as it exists at the time, or cotemporaneously with himself, and not as it may have exhibited at sometime in the past." It follows, then, that the standard of such ordinary skill may now be in advance of what it has been and will be, and according to the general and material progress made in the science of Medicine and Surgery, the standard of ordinary skill which is required of any physician and surgeon, it will be borne in mind, is that degree and amount of knowledge and science which the leading authorities have pronounced as the result of their researches and experience up to the time, or within a reasonable time before the issue in question to be determined, is made; and such physicians and surgeons must be held to apply in his practice what is thus settled in his profession.

That which is pronounced as settled in any profession by the leading and standard authorities therein is within the reach of any practitioner, and his being such practitioner presupposes the fact, and is guaranty, on his part, that he is in possession of a

knowledge of it as so settled; and the physician impliedly contracts with those who employ him that he has such skill, science and information as will enable him, properly and judiciously, to perform the duties of his calling: not the highest degree of skill and science, but only such reasonable degree as will enable the person, safely and discreetly to discharge the duties assumed. A physician is expected to practice according to his professed and avowed system.

The Homœopathist is not supposed to understand, nor to practice, as does the Allopathic. The Physiopath, or Botanic, is not required or expected to understand further than lobelia, pepper, nervine, composition, number six, steam, and blackroot. He is employed as a Steam Doctor. The Allopath, or so-called "regular," is not supposed to understand, nor to practice, as does the true physician. He is employed as a Allopath, and is compelled to practice according to the tenets of Allopathy, or of the so-called "regular" school. The Eclectic is employed as a true physician. He is supposed to understand Allopathy, Homœopathy, Physio-medical or Physiopathy, Hydropathy, Crono Thermal, and all other systems of practice, but is not required to practice any one of these exclusive systems; nor is he required to practice all of them; but he is required to choose the best and most reliable and best agencies from all of the different systems, and to sustain the vital forces, conserve Nature, and to avoid all harsh means. He is also required to understand Anatomy, Physiology, Pathology, Chemistry, and the Therapeutics of all schools, and to understand the relations existing between drug-action and expressions of diseased conditions. You see there is more required of an Eclectic than of any physician of other schools. You may ask, Why? Simply because—as is generally known and admitted among intelligent communities, that the practice of medicine is progressive, and as Eclectics are progressive—they are required to practice according to the tenents of the progressive and true school. How utterly unworthy, then, and how unlawful, and how disgusting are those who propose to practice any one system the patient may be partial towards! I infer from all this that the average practitioner of the Allopathic school, Homœopathic school, and Physio-Medical school is required to understand and obey his master, and that he be not led away by scientific, rational and true medication; and the Eclectic is required to not be led away from the true system of practice by

any plausible theory, or new discovery, until it has been well tested and proven, not only by those who have the facilities for investigation, but, also, he must investigate and test for himself before he can safely subscribe to it. And this is well, from the fact that, in many instances, the masters in each and every school have clung too closely to pet theories which have been proven to be erroneous. But we must accord to men of honest intentions pre-eminence of ability, and facilities for investigation that are beyond the reach of the average practitioner, especially such men as Howe, Hahnaman, Scudder, Gun, Kunze, Wilder, King, Adolphus, Goss, Potter, Barthols, Ringer, Bennett, Hughes, and others. How futile and preposterous, then, are the pretentions of those would-be authors who are continuatly airing their ideas in cheap journals, and, as is often the case, ridiculing the teachings of such men as those above named!

Now, I claim that the Eclectic School of Medicine is the only true school—that it is fifty years in advance of all other schools in therapeutics. This cannot be refuted. The Homœopathics are next in advance; but they have only advanced in a multiplicity of remedies. They have a law of cure formulated and promulgated by their master—"*Similiar similibus curantev*." They cannot advance beyond this and remain Homœopathists. Now, as to the so called "regulars:" they are fifty years behind in therapeutics. Their latest revised Practice—the present standard—viz, "A System of Practical Medicine by American Authors," edited by William Pepper, M. D., LL. D., and assisted by Louis Star, M. D., five volumes, published by Lea Brothers & Co.—three volumes of which I have carefully perused, and I emphatically declare, in a therapeutical point, is fifty years behind the times. They adopt Eclectic therapeutics twenty-five to fifty years after their successful employment by our school, and then refuse to give us credit for the same! They are not progressive, only as they are forced to be. They are a cold-natured and slow plant—have to be forced by transplanting and cultivation in the hotbeds of Eclecticism before they can thrive. They have given up all hopes of improving their practice, and have turned their talents to legislating against the progressive schools. They are to be pitied. Their ignorance and stupidity are evils which courts of justice and legislatures have no adequate power to remedy. Enlightened public opinion, and the successful and judicious practice of our school, and the Homœopathists have done

much to discountenance their quackery and to advance true medical science.

In conclusion, I repeat, the great object of our Association, as it seems to me, is not Innovation. We do not expect to found new theories, to establish new systems of practice; but to assist each other in thoroughly understanding the principles and practices of the three systems of medicine, and to assist in perfecting a rational and conservative practice; and, by social intercourse and friendly attrition we shall lose the individual, egotistical and intolerant; and when we return to our homes from this meeting let us go with renewed courage, and with inspired zeal for more thorough and conscientious labor.

TREATMENT OF PILES.

[A condensation of Dr. W. R. KING'S valuable paper, presented to the Eclectic Medical Association of Alabama, at its last session, in Montgomery. May 6, 1886, upon the "Cancer; Anatomical Character, Consequences, New Treatment, etc.," by W. H. LAMAR, Secretary.]

Whatever impedes the return of blood from the rectum towards the heart will cause a congestion of the part which forms a vast cular network in that locality.

If the obstruction be great, or of considerable duration, the congested vessels will yield to the pressure, gradual dilatation of the walls will take place and, may be, rupture their contents into the surrounding cellular tissue.

This may be the result of portal congestion or torpor of the liver. Luxurious living, sedentary habits, prolonged standing, constipation, abdominal tumors, violent efforts to evacuate the bowels may become the causes and aggravations of the trouble.

Piles consist, essentially, of enlarged blood vessels, chiefly veins, with congestion and extravasation of blood. Hypertrophies, growths of connective tissue, mucous membranes, etc., may enter into their composition. They are called internal and external, blind or bleeding, according to locality, either above or below the sphincter ani muscle. All minor divisions are comprehended in these.

Neglect or bad treatment may result in fistula, strictures of the spinchter, prolapsus of the bowel, and exhausting hemorrhages.

There are many diseases of this locality denominated piles that are not so in reality, viz, prurital ani, erythema, herpes, chronic eczema, marginatum, oxyuris, vermicularis, polypus, benign tu-

mors, abscess of, ulceration of, congenital malformation, facial impaction, atony of rectum, and foreign bodies—all of which are generally called piles, and so treated, and consequently a great deal of bunglesome practice is the outgrowth of diagnostic errors.

The theory of treatment, either in fibroid growths or vascular tumors, is to cut off the circulation, obliterate the varicose veins, set up adhesive inflammation, and cause absorption or exfoliation of the superfluous parts. These results are successfully accomplished by very slight inconvenience and no hazard. Hypodermic methods to be indicated. These applications, if done in the morning, are almost painless; and if the tumors are not already down, the patient may go about his ordinary business without inconvenience; otherwise, he should keep to his bed.

Was himself successfully and permanently relieved of five projecting tumors—the smallest not smaller than a large cherry, the largest comparing in size to an English walnut—under his own prescription and directions. Considerable soreness was experienced for from five to seven days; was able to be up on ninth, and in his buggy on the eleventh, resumed his professional engagements; has never had a return, having passed through the hardships of war.

Dr. King, in presenting to the profession his well-attested experience with his new method and *specific* treatment, urges strict and continuous attention as an indispensable element of success, as mean equipments and indifferent and half-handed attempts can only bring discredit upon a potent agency, without a benefaction to the suffering or *eclat* to the practitioner.

He does not now, as formerly, fill the tumor with the fluid; uses from 4 to 10 drops at each operation, which is to be repeated every day, or every other day, depending upon the size and vascularity of the tumor, until there is a perceptible shrinkage; then it is to be suspended for four or five days, having the patient to use hot bottles for twenty or thirty minutes at each sitting, repeating every two or three hours, if there is much soreness, otherwise, twice daily, and using the following ointment after each bath: R. Tannic acid, ʒ ss; pulv. camphor, ʒ ij; olei sassafras, ɣtts. v; olei teribinthine, gtts. x; carbolic acid, gtts. x; pulv. ɔpii, grs. viij; solid extract belladonna, grs. vj; vaselin, ℥ iss. Apply well up the rectum with the finger after each bath.

Bodenhamer's bivalve rectal speculum, Weiss' trivalve dilator, and a hypodermic syringe with two needles, three and one-half

inches long, and a short needle for cover work, constitute the necessary instrumental outfit.

Having charged the syrine and guaged the dosage, introduce and then withdraw the needle so as to give exit to whatever blood will flow from the puncture of a highly vascular tumor; reinsert at the same orifice and inject the required amount, apply the ointment, and return the tumor within the sphincter. In making a second injection in the same tumor at another point, guard the exit of the injection by the application of finger upon the orifice of the first puncture.

Fibrous tumors are more difficult to get rid of, because of the honey-comb structure at their base allowing the injection to enter the intercellular spaces, and should be injected into the body of the tumor itself. The tumor will show signs of death in a few days, by their dark colorations, and finally drop off in defecation or may be removed with the pliers, care being exercised to be in no great hurry because of a possible hemorrhage.

Position for examination, or operation, on the left side with the knees well drawn up. With these preparations and necessary implements, we may proceed to inject the following pile specific: ℞. Glycerine, ʒ i; thymol crystals, C P., grs. xxx; oleum sassafras, gtts. xxx; morphia sulp., grs. v; aqua dist., ʒ iss. Take an ordinary test-tube, ounce and a half capacity, put into it the 30 grains thymol crystals, and glycerine ʒ i, and hold over a spirit lamp till dissolved. Put the morphia sol., thymol and other ingredients into a mortar with car. magnesia, ʒ ss; rub well and filter, and it is ready for use.

Thymol crystals are not to be had of most drug stores. McKesson & Roberts furnish a pure article at $2 per ounce. The morphia in prescription may be increased if pains are very severe. A 4-per cent. solution of cocaine muriate may be advantageously employed in connection with the above treatment, in lessening the sensibility of the tumor and aborting the pain of the operation.

CASE BOOK.

BY C. D. R. KIRK, M. D., EUDORA, MISS.

Mrs. C., a widow of 35, requested me to prescribe for her, and in reply to my interrogation as to her disease, said she had no fever, but thought she was very bilious. The tongue was small, thin, pale, with thin grey coating and prominent papillæ,

the indications for calomel in small doses, which was prescribed. Early the next night I was requested to visit the patient in haste as she was very sick. I found her with congestion of stomach, bowels, ovaries and uterus. There was high range of temperature, great pain in region of left ovary, and great nausea. The calomel had caused dark, green evacuations, but a slight chill following with high fever had changed the nature of the case. Her menses was flowing naturally some eight or ten hours previous to the time of the chill, but had now entirely ceased. The pulse was small and rapid, cold extremities; very restless, with fugitive pains in extremities. I prescribed aconite and macrotys in small doses, alternated with very small doses of ergot supplimented with hot applications to extremities. This treatment gave gradual relief and partially restored the menses. I then prescribed quinine and picric acid in small doses, which produced perspiration by the aid of warm pennyroyal tea. The case was soon dismissed, and the writer congratulated himself on getting so bad a case up so easily. But the congratulations had scarcely ceased when the widow sent for me again. "She was suffering death every breath." The pain now was in the lower abdomen and back, about the sacrum, and similar to labor pains, with very short intermissions. Her back felt as if something was being torn from it, whilst the pain of the uterus was of the most expulsive kind. The abdomen was swollen and tender to the touch, and the patient begged piteously for relief. A vaginal examination revealed a retroversion of the uterus with great tenderness. The uterus was enlarged, but not hard. I made an attempt to replace it but found the tenderness too great. I therefore gave anodynes, applied laudanum liniment, followed with peachtree poultices. The treatment gave temporary relief and relieved the excessive tenderness to a great extent. I returned next day and after administering chloroform to partial anæsthesia, I, by the use of a sound sponge on a dipper handle, was successfull in replacing the organ to the great relief of the patient.

When young physicians read of retroversion and other displaced conditions of the uterus they imagine that they will have no trouble in such cases, but when they have gone through the entire list of remedies and means without success, they will then realize that to replace an impacted uterus requires experience and skill. In this case, I tried the patient in every position,

using only my hand and the sound, and thought that I had succeeded, but the organ would soon assume its abnormal position, but the sponge sewed around the end of the dipper handle was just the instrument needed. The patient placed on her side, and whilst the sponge moved the fundus, a finger in the os drew it down in place. The patient expressed herself as feeling quite comfortable, and I went home again believing that the widow would not need me again very soon; but in about twenty-four hours I was requested to visit her again as speedily as possible, that she was quite sick. I answered the call in due time. I found the patient cramped and deathly sick with nausea for a few minutes, then some griping pains of the lower abdomen—a case of bilious colic. She had felt quite well the day before the attack and had dined on fried chicken, vegetables and pickles, followed by copious draughts of cold water. I prescribed dioscorea in half drachm doses of the tincture combined with one to two drops of tinct. nux vomica, which gave temporary relief, but still the pains continued in a mild way for the day, when a brisk purgative, assisted by enema, gave permanent relief. Chloral and other anodynes were freely used while waiting on the more curative remedies.

And this reminds me that before giving the next change of the widow's suffering, to suggest to the beginner in medicine that opium and its salts are the most dangerous remedies, and at the same time the most tempting that can be given, except actual poisons. Allopaths lose a great per cent. of cases of bilious colic, and attribute the trouble to the *extremely costive* condition of the bowels, but never seem to think of the direct effect of morphine, which is, in this disease, almost invariably a costive condition which cannot be relieved. Then ease the patient with chloroform and simple anodynes, and do not give opium in any form until the bowels have been thoroughly evacuated.

I remained with the patient several hours after she was relieved and went home this time very certain in mind that the case would continue all right to convalescence, but had scarcely enjoyed a rest of three hours when the widow's man called loudly for me again. This time "she is about to have spasms"! And from the messengers account I expected to have a case of meningitis to treat, but found the patient sleeping quietly, breathing naturally, and pulse normal. Her friends had given her a dose of an anodyne, which was evidently all that

this needed, although half an hour or so previous to that time they could scarcely hold her on their bed, though the patient, when aroused up, could not locate the pain—as it was histeria. An occasional anodyne and suitable diet was advised with full explanations to patient and proper way to avoid "spells" of it.

MY POCKET CASE—CONTINUED.

BY I. J. M. GOSS, M. D., MARIETTA, GEORGIA.

The Bromides.—The bromides are about as much abused as opium is now, and more than opium used to be. The bromide of potassa is very injurious to the stomach, and has a very unhappy effect upon the nervous system. After the benefit to be obtained from the bromides in affections of the brain and the nerve centres they are of no use. Properly given, they ameliorate epilepsy. The primary effect of a medical dose contracts the blood vessels, especially those of the chord and brain. They arrest reflex action and diminish muscular irritability. But in overdose, continued long, they dilate the arteries and produce congestion. I use the bromide of soda, lithia ammonia does, hence, these are best.

Coctus Grandiflorus.—The night-blooming cereus acts through the cerebro-spinal nervous system. It stimulates and contracts the circular fibers of the heart. It also has a tendency to lessen rheumatoid inflammation. Through the ganglia of the heart it controls the morbid action of that organ admirably. Its action is marked in all cases of irregularity of the heart's action. In cases of constriction of the heart, in dyspepticts cactus gives relief.

Calandula.—English marigold has a fine action upon the vaso-motor system. It is applicable where there is debility of the capillary system, or paralysis of that system. I use it as a dressing in cuts, and lacerated wounds, which it causes to heal quickly. It may be given internally in the form of a tincture, 2 gtts., every two hours, and the cerate used locally.

Camphora—Laurus Camphor.—Camphor in the form of a tincture may be given in doses of 5 gtts. in cholera morbus and cholera. It is much used locally by the people.

Canabis Sativa.—Hemp acts through the cerebro-spinal system on the mucous membranes, in cases of inflammation, with good effect. It also acts on the brain.

In gonorrhœa, after the acute stage passes off under aconite and gelsemium, then canabis will act well in the form of a tincture. Where there is swelling of the prepuce or red spots on the glans, or where there is bloody urine, it is applicable, and in doses of 5 gtts. will aid the cure in a marked manner.

Capscicum Annuum.—Cayenne pepper acts through the spinal cord. It acts upon the mucous membranes in cases of inflammation of that tissue. In malignant sore throat it is a valuable remedy, used locally in infusion. It acts well in indigestion, if given in small doses.

It has an astringent action and, hence, is valuable in hemorrhage. It is a valuable remedy in delirium tremens; in doses of 20 to 30 grs., it gives relief.

Chelidoniam Majus (*celandine*).—This article acts through the cerebro-spinal system, also on the digestive organs through the vagi, and upon the lungs through the pulmonary nerves, and upon the liver through the hepatic branch of pneumogastric nerve. Rademacher says "that it acts upon the internal structure of the liver." Having specific affinity for that organ.

Its physiological action on the liver, in large doses, is to inflame the liver by its direct stimulating effect upon the *vena portæ* and its functions. And this overstimulation of the portal circulation causes the arrest of biliary secretion, as all over stimulus to an organ perverts, or arrests its functions; that is why large doses of medicine defeat our object. Diminished secretion of bile is the indication for chelidoniam. It is allied to bryonia alba in its action. The dose of the tinct. is ℥ to 5 gtts.

Cimicifuga Racemosa (*cohosh*).—Cimicifuga also acts through the cerebro-spinal system of nerves. First, it has an affinity for the unstripped fiber of the muscular system, which renders it a very positive remedy for rheumatism. Its affinity for the nerves of sensation renders it efficient in mialgia. It also has an affinity for the female organs. In all cases of amenorrhœa, from deficient nervous energy this remedy will act promptly. In suppression of the menses from cold, the cimicifigua is indicated, especially if there are mental emotions, rheumatic pains, or intense headache, or uterine crany. I have used it successfully in dysmenorrhœa in many cases. I have had it to aid in arresting of leucorrhæa. As a parturificent, it acts well, as its influence over the uterus is more prolonged than that of ergot. And it does not produce that stupefying and dangerous effect upon the fœtus as does ergot.

Cinchonia or its salts.—Through the cerebro-spinal centre cinchonia and its salts have several special centres of action. In overdose, it often produces intense hyperæmia of the brain, with headache and coma. It paralyses the auditory nerve, producing singing, buzzing or deafness. It also affects the eyes, producing mydriasis. It also often produces neuralgia. Through the motor centre it sometimes produces convulsions or paralysis when given in very large doses. If continued too long it produces parisis and anæmia, with congestion of the spleen. It also produces congestion of the liver and jaundice. But in medical doses, say 5 or 6 grs. a day, the salts of this bark arrest periodical fevers in from 2 to 4 days with great certainty. I alternate the sulph. of cinchonidia with the fucus marina, and these arrest the fever with great certainty. The mixed salts act well.

Collinsonia (*stone-root*).—This remedy acts through the spinal and hypogastric nerves. First, it acts upon the gastro-intestinal canal, and aids in the cure of hemorrhoids. With this and hamamelis, or æsculus glabra, and the local use of Monsell's solution, I seldom fail to cure hemorrhoids. This it does through the portal system of nerves. It has the power to contract the portal veins and thus drives the blood along its course to the heart. It overcomes stasis in the venous capillaries elsewhere, and is used by the people as we use arnica in bruises. It acts upon the stomach as a tonic, and promotes digestion. It overcomes passive congestion. It acts also upon the heart, and contracts it when dilated; hence, it is a remedy for hypertrophy in its earlier stages. It is asserted by some writers that it is curative of valvular disease of the heart, and it is not impossible that it may do good thus used.

NATIONAL ECLECTIC MEDICAL ASSOCIATION.

[By our own Reporter.]

The Sixteenth Annual Meeting of the National Eclectic Association was held at DeGive's Opera House, in the city of Atlanta, Ga., June 16, 17, and 18, 1886. The attendance exceeded two hundred.

First Day—Morning Session.

The Association was called to order at 10 o'clock by the President, Henry Beam Piper, M. D., of Pennsylvania. The

Rev. A. G. Thomas, M. D., of the Church of the Disciples of Christ, Atlanta, offered prayer.

The Hon. George Hillyer, Mayor of Atlanta, being present, was introduced to the Association by the President, and greeted with prolonged applause; after quiet was restored, he advanced to the front of the stage and proceeded at once to address the Association in an eloquent oration, welcoming its members to the city and State. He said, in substance:

LADIES AND GENTLEMEN OF THE NATIONAL ECLECTIC MEDICAL ASSOCIATION: I am indeed delighted to welcome you to our city, to our homes, and to our firesides. In behalf of our city I bid you thrice welcome. We feel it an honor for this honorable body to meet within our gates. We want you to feel at home. If you do not, it will be your fault. We are a tolerably clever people. At this hour our people are busy and cannot attend your meetings. I am glad, however, to see that quite a number are here, and all join me in bidding you welcome. Atlanta epitomises Georgia. It might be well to mention the greatness of the State, as many are here from a distance; that the mountains in North Georgia rise to such a height that the climate assimilates that of Scotland. Our climate shades off until it reaches the ocean and Florida, the land of tropical fruits. In mineral productions it equals any State. These mines are in process of development, and promise untold wealth. Our agriculture is varied, and our people enterprising and growing in education. Everywhere our people are warmhearted and give a cordial recognition to the stranger.

Mayor Hillyer spoke of the progress of the New School of Medicine; how science had developed for the past century, and people had become more learned, the system and knowledge of medicine more perfect. He spoke of the progress of Theology, the grandest of all sciences. He said that he was one of those who didn't believe in this or theology on any certain point, except to learn others and bring the truths home to them. He spoke of the science and development of Government. He mentioned some who had been great men in the South American Republic, Charles V in Germany, Confucius in China and others, impress us as the greatest men of the day. "In your own profession progression has been great; in Chronicles, the good old king, Asa, appealed to physicians." "He slept with his old fathers." So it is supposed he was healed, and this is the first account of the physicians that we have.

He was forcibly struck in Macaulay's writings of what he brings out in a fancied conversation between a disciple of Bacon and one of Aristotle. They came to a ship wrecked on the seashore. Aristotle's disciple would say that it was

but the result of the danger of the sea. Bacon's disciple would apply the diving bell and rescue the treasures in it. They came to a mine where an explosion had occurred. The first would say, "These are the results of the known dangers of the mines," while the other would recommend the use of the safety lamp to guard against a recurrence. They came to a town infested by small pox. One would say, they must bear their ills with fortitude and expect no sympathy. The other would take out his lancet and vaccinate the people to prevent the spread of the epidemic.

We must not adhere to Aristotle or to Bacon, but bring out the truth from philosophy, old and new. Your profession is one of progress. Its knowledge has spread until it has attained the rank of the first means of human beneficence.

Take the art of teaching. What progress has been made in that. The early philosophers walked in the fields and taught their pupils orally. It was but an effort of the mind, and the knowledge perished with the speaker and listener. How many a germ of thought that might have lived to adorn coming generations was thrown away; what incalculable benefit to the ages would the wisdom of these philosophers be, could it have been taken down by the stenographer's art and preserved!

The rapid acquisition of knowledge is the rule of the day. Commerce is borne on wheels with almost the speed of lightning across the continent; mountain streams of pure water are carried into the heart of the city; bridges span our rivers

While the grand truths revealed at Sinai and exemplified at Bethlehem and Calvary remain the same, what progress has been made in bringing these truths home to the people.

We have made progress in the science of government. Men do not now stand where they did when a man's family constituted the state. How many really great men existed in the past ages? Men who impressed themselves on their race and succeeding ages? In South America there is but one, Bolivar; in America, Washington; in other lands Cromwell, King Alfred, Charlemange, Cæsar, Alexander, Cyrus, Confucius, Kubla Khan.

In this day we possess many men who by acquired knowledge know more of the government than any of these ancients, except Washington and Bolivar.

Some of these ancients were despots and knew nothing of human liberty. We have learned that the authority of all governments rests upon the consent of the governed.

Mayor Hillyer spoke at some length and concluded by saying:

"I exaggeate nothing when I say that our people are happy and proud to see you, and bid you God speed, trust-

ing that your deliberations will be a success, and that you will bound still further forward in your profession." [Applause.]

The Secretary, Dr. Alexander Wilder, replied as follows:

MAYOR HILLYER: In behalf of the National Eclectic Medical Association, and the representative Eclectics affiliated with this body, I thank you. This generous welcome to the Imperial City of the South has been given too warmly and cordially not to be heard without deep emotion, and in terms too exquisite to be responded to in language as eloquent and befitting. You must accept our declaration in place of more expressive terms of acknowledgement.

We have already surveyed your city with profound admiration. We bear in sorrowful recollection the period of strife, when the citizens of this Republic were in cruelest fraternal conflict, each seeking the life of the other; when the torch was applied to your homes, laying your city in ruins. Like the Phœnix, she has risen from her ashes into new life, to become the metropolis of your Imperial State, and more, the great metropolis of the country stretching from the Atlantic Ocean to the Mississippi.

We have come hither from every direction—from Maine, Wisconsin, and all the North and West—an invading army, not to fight with implements of destruction, and hearts bitter with fraternal hate, but to conquer with the agencies of peace; aye, to surrender to that most potent of weapons, a cordial welcome. We grasp your hands to-day in more than friendship, as the members of the same family.

You have learnedly traced our vocation, through the past, into the period when History pales into myth and tradition; when there were no countries, but only tribes and families, every one, like the Arab, hostile to the others; when every clan and household had its own altar-fire, which for a stranger to look upon was sacrilege, and the rule of the patriarchal chief was absolute, even to the immolating of his own children in solemn worship. We come, then, to the time when all that was regarded as vital and profound in religious belief was hidden from profane eyes in the crypt and initiation chamber of the secret sanctuary; and the physician, too, was a priest, sworn by oath not to divulge his art to the multitude, and tonsured to denote his sacredotal character. Aye, then

Hippocrates, so often fancifully styled "the Father of Medicine," studied its literature as it was inscribed upon the tablets in the temples where he had been trained up from boyhood, and consecrated.

You have alluded to the glorious sages of those far-off times. I, too, admire, with deep reverence, the maxims of Confucius, the lessons and revelations of the Zoroasters, the almost superhuman wisdom of the divine Plato, who taught the philosophy that all students of the celestial knowledge have ever since made their principal text-book. Dazzling as may seem the splendor of our so-called Science, its sublimest thoughts were from the same luminous source as these worthies of the Past.

The science of Government and Political Economics deserve, perhaps, all the honor which you award; yet, when I have felt sad and gloomy over affairs, I have been ready to believe that the man set to walk blindfolded among redhot plowshares stood as good a chance to obtain justice as by the tortuosities of the law.

You have spoken eloquently of the resources of your State, with the climate of the colder zones and tropical regions, and the products incident to both. You allude, also, to our foreign commerce, so great, so diversified and rich. I concede it heartily; yet let me recall the fact, that, if Thomas Jefferson's wish should be granted, an ocean of fire separated the two continents, the commerce between the different regions of our country would be found a far greater source of wealth. Even now, great as is our trade with Europe and the Orient, the traffic along our own coast, and by the medium of our own railroads, is many times greater in amount, and an infinitely richer source of wealth than all which is carried on with other countries. Every reason of interest, as well as kindred, teaches us to foster and perpetuate the closest and most friendly relations.

Our school of medicine, too, is the AMERICAN practice. The other schools and sects are alien and exotic; they were imported from the Old World, and were never indigenous to our soil. They are, ever and anon, therefore, seeking to foist upon us, and especially upon our legislation, methods and measures utterly hostile to the Constitution of our people and to the genius of our free institutions. But this—our Ameri-

can Practice—is broad in principle, and wholesome in application. It is ECLECTIC—not as choosing at random from the heterogenous accumulations of others, with no control, idea or principle; but because it is developed upon the Apostolic maxim, "Prove all things, and hold fast that which is good." Our aim in medication is generous and conservative; if we can do a patient no good, we are careful to do him no hurt. We are, and always have been, discoverers. Our mode of practice is distinct from that of our rivals, and we have a Materia Medica all our own.

Your Honor has, with a keen humor, cited us to Asa, the Judean king, who came to a sorry end with his physicians. Let me go back to the Book of Genesis, where it is recorded that "Joseph commanded his servants the physicians* to embalm his father; and the physicians embalmed Israel." Also let me refer to a still older practitioner, who prescribed the forbidden product of the Tree of Knowledge to the first mother of mankind, promising as the result, "Ye shall be as God." She took the prescription, and it evidently works yet!

But do not, let me entreat, do not revive the objuration of the son of Sirach: "Whoso is abhorred of the Lord, let him fall into the hands of the physicians," nor the taunt of Job: "Ye are all physicians of no value." Remember, rather, the appeal of the Prophet: "Is there no balm in Gilead? is there no physician there? Why, then, is not the health of the daughter of my people recovered?" The idol of our calling, sir, toward which we aim and desire to approximate, is that of the Great Physician: "They shall take up serpents; and if they drink any deadly thing, it shall not hurt them; they shall lay hands upon the sick, and they shall recover."

Right here let me pay a deserved and honorable tribute to the civil and military authorities of your great Commonwealth. You were superior here to the narrow exclusiveness and proscriptive spirit that was paramount elsewhere. During our civil war the services of the Eclectic were welcomed as cordially in the regiments of Georgia as those of his self-styled "regular" brethren; there was no discrimination, no exclusiveness, no proscription. In our Northern Army the case was the very reverse. The Eclectic might carry a musket, like a common soldier or a freed negro, but he was

* Hebrew, REPHAIM. The ancient population of Palestine, whom the Israelites uprooted, bore this designation (often translated *Giants*), and Goliath, of Gath, was of this race. Perhaps they were the Shepherds or Kyklopes who once held Egypt, and revised its civilization; and so that the skilled and learned vocations were practiced by them. Joseph, being a Palestinian, might consistently employ them; but Asa, in doing so, virtually repudiated the priest-physicians of his own people. "He sought not unto the Lord."—NOTE FROM DR. WILDER.

forbidden to prescribe or do other professional work. As a physician, he was a citizen without a country. Like the Great Physician of All, he was "despised and rejected, and numbered with the transgressors." In Georgia, he both fought in battle and bound up the hurts of the wounded. All honor for this to your noble Commonwealth! For this alone, as well as for other reasons, Georgia deserves pre-eminently the proud title of Empire State. God bless the Commonwealth of Georgia!

We cordially reciprocate your hearty welcome. We are glad to be with you. We hope and trust that the mutual exchange of friendly sentiment will be such that when the time comes for Atlanta to bid us farewell, you will wish to see us here again, and we shall want to come.

Again and again we thank you. You are the chief magistrate of a prosperous city, which but for the way we took to reach it, we would have supposed to belong to the North. The State of Oglethorpe and Troup has always been superior. Long ago I had heard of her, that she was wealthier than her sisters; that her people were more energetic and thrifty; that her statesmen were of the foremost men of the South. Before we saw, we had believed it; now that we see, we know whereof we have believed. We are more than glad to be with you.

The preliminary business of the Association having been transacted, President Piper delivered his annual address. It was a thorough review of the field before us, and handled the Great Conspiracy of the Age—the project of medical legislation—ably and without favor. It also called attention to the International Medical Congress, in which he declared Eclectics were entitled to membership equally with other physicians.

On motion of Dr. J. H. Duncan, of Indiana:

Resolved, That the Committee on Credentials be instructed and empowered to consider all nominations of delegates and others—members of State societies—duly recommended for permanent membership, and to report the same favorably, if there appear good and sufficient reason for so doing, and the said candidate come within the requirement of Article 1, Section 1 of the By-Laws.

The Committee on Credentials was as follows: J. R. Duncan, of Indiana; W. M. Durham, of Georgia; T. J. Batchelder, of Maine; C. M. Ewing, of Pennsylvania; C. Markt, of Ohio; J. N. Adkins, of Texas; H. K. Stratford, of Illinois. Each of these is or has been President of the State Society of his own State, and two of them, Drs. Duncan and Stratford, are ex-Presidents of the Association.

Treasurer Anton then presented his Annual Report. It shows a year of active business. The fiscal year began with $309.45 in the treasury, which was increased by fees, dues and

donations to $1,547.45. The payments for the same time amounted to $1,388.54, leaving in hand $158.91, with an indebtedness on hand of $479.12. The Association has published a volume of Transactions of 492 pages, a copy of which is presented to every member not in arrears, and also to every person joining the Association.

Drs. E. Younkin and Milton Jay were appointed to examine the accounts and vouchers, and afterward reported them correct.

Dr. Wilder, the Secretary, read a letter from Dr. Charles Band, of Crete, Nebraska, sending $100 for the treasury of the National Association. The following resolution was adopted and a copy ordered to be transmitted:

Resolved, That Charles Band, M.D., by his earnest sympathy and repeated acts of generosity, merits the cordial acknowledgment of the National Eclectic Medical Association, and that we render to him our thanks, together with our sincere wishes for his health, long life, and that prosperity which he so truly deserves.

A letter was read from Dr. T. Hodge Jones, of Missouri, proposing an amendment to Article III of the By-Laws, so as to abrogate the disapproval of handbills and circulars, but to condemn false statements in regard to cures. The letter and proposed amendment were referred to a committee consisting of Drs. S. B. Munn, Edwin Younkin, and B. L. Yeagley.

The Committee on Credentials reported the names of delegates from Georgia, Connecticut, Wisconsin and Vermont, all of whom were duly elected permanent members.

A recess was then taken till afternoon.

When the Association had re-convened, the committee reported the names of fifteen delegates from New York. Exceptions were taken to five, and the question being divided, the others were elected to membership. The names of the remainder were again referred. The point made on four of them, was that they were not members of the Society which had nominated them.

The following report was also received:

To the National Eclectic Medical Association:

We, the Committee on Credentials, recommend the admission of J. M. Hole as a delegate from the Mahoning Valley Eclectic Medical Association, of Ohio, and also for membership of this Association.

J. R. DUNCAN, Chairman.
H. H. STRATFORD,
T. J. BATCHELDER,
J. N. ADKINS,
C. MARKT,
C. M. EWING,
W. M. DURHAM.

The report was accepted, and Dr. Hale elected.

The President announced the order of business to be the holding of Sections.

Dr. I. J. M. Goss, of Georgia, accordingly called Section A to order. Papers in this department of Practice of Medicine, Materia Medica and Medical Chemistry, were then read by title; after which the Section rose and reported progress to the Association.

After further reports and election of members, the President announced the following officers of Section B: Physiology, Hygiene, Medical Jurisprudence and Legislation, Drs. O. H. P. Shoemaker, of Iowa, Chairman; J. H. Tilden, of Illinois, Secretary.

After reading of papers, the Section rose and reported to the Association.

Reports were received from the Committee on Credentials, and the Association adjourned till morning.

The Mutual Aid Society, which has been organized under the auspices of the National Association, held its first annual meeting in the evening. Dr. S. B. Munn, President, took the chair, and Dr. Alexander Wilder, the Secretary, read the report of the last meeting.

The number of names required for the beginning of business—one hundred—was announced as having been obtained. The operations of this organization are simple and inexpensive. At the death of a member the Treasurer is required at once to pay his beneficiary a sum equivolent to $2 per member; thus beginning with $200 now, and increasing in future as the membership increases, etc. The money is supplied by a contribution of $5 from each member on admission, and an assessment of $2.20 at the death of a member.

The following officers were elected for 1886–87: President, S. B. Munn, M. D., Waterbury, Conn.; Vice-President, H. K. Stratford, Chicago, Ill.; Secretary, Alexander Wilder, Newark, N. J.; Treasurer, James Anton, Lebanon, Ohio. The next meeting will be held at Waukesha, Wisconsin, June 15, 1887, the first evening of the meeting of the National Association.

Second Day.

The President took the chair at 9 o'clock. Reports upon the Status of Eclectic Medicine in the several States were submitted.

The Committee on By-Laws reported adversely to the proposed amendment of Dr. T. H. Jones in relation to advertising. The report was agreed to.

Dr. W. M Durham invited the members of the Association to an excursion in the afternoon, to the Ponce de Leon Springs. The invitation was accepted.

Dr. Butcher made a report for Dr. J. H. Scudder on Specific Medication.

Dr. L. T. Beam, of Pennsylvania, read a report on Organization and Co-operation Our Bulwark of Safety.

The other special reports were made by title.

Dr. Younkin called attention to the meeting of the International Medical Congress next year and the importance of representation. He offered a resolution providing for the appointment of six delegates of this Association to that body.

Dr. Jay, of Illinois, moved to make the number twelve. Dr. Younkin accepted the amendment.

Dr. Wilson H. Davis, of Illinois, moved to name one from each State. The number was finally fixed at twenty-five delegates and twenty-five alternates, and the resolution was adopted.

On motion of Dr. J. R. Borland, of Pennsylvania, the following committee was appointed to propose names of delegates: Drs. Younkin, Munn, Davis, L. T. Beam, and L. E. Russell.

The Committee on By Laws made a report recommending the following amendments:

1. To change Section 1 of Article I, so as to inhibit the appointing of delegates by local societies to the National Association, except by the approval of the State society of the State in which the local society is situated.

2. To add to Article IV, as Section 5, the following: No member expelled from this Association shall be again admitted, except the local or State society to which he may belong shall show good and sufficient reasons for his reinstatement.

The amendments lie over for one year.

Reports were then submitted as follows: By Dr. I. J. M. Goss, on Yellow Fever; by Dr. C. E. Miles, on Asiatic Cholera; by Dr. J. B. McFatrich on Surgical Gynæcology; by Dr. D. A. Cashmon, on Diseases of the Eye; by Dr. E. Younkin, on Plastic Surgery; and by Dr. W. H. Davis, on the Indigenous Materia Medica.

Dr. W. H. Lamar, of Alabama, read a paper on Chloroform, disapproving its use.

Dr. L. E. Russell, on a question of privilege, offered the following resolution:

Resolved, That all delegates from local societies in States having State Associations, shall present credentials duly certified by the officers of such State Associations, that said local societies are in good order and standing with the State organizations.

Adopted without dissent.

Section E. On Psychology, Mental and Nervous Diseases, and Electro-Therapeutics was held. Papers by the chairman, Dr. J. H. Woodward, on Electricity in Medicine, and by the Secretary, Dr. J. R. Borland, on Delusions of Inebriety, was submitted.

Prof. C. A. F. Lindorme, of Fort Reed, Florida, also read

a paper on Insanity, which was listened to with rapt attention.

The Section rose and reported to the Association, after which a recess was taken till half-past two.

The afternoon session was principally occupied by the Section on Surgery, of which Dr. L. E. Russell is chairman.

Papers were read on Surgical Progress, etc., after which the Section rose and reported to the Association.

The excursion to Ponce de Leon Springs occupied the afternoon and evening. The members from abroad were delighted at their entertainment. Walking, dancing and refreshments were the principal diversions. No alcoholic beverage was served or desired; and for order, dignity and self-respect, no medical gathering in the State has ever excelled this. The other School had also a banquet the same evening at the Kimball House, which was all that this was not.

Friday was set apart to the concluding of business. The Section on Obstetrics and Gynæcology was held, and papers read by Drs. Russell and Butcher, of great interest and value.

Section F. on Dermatology was held, Dr. J. C. Butcher being chairman. He read a paper on Neuralgia of the Skin, and Dr. Anna E. Park, another on Eczema of Young Children.

Dr. M. F. Dumas, of Bald Knob, Ark., sent in a paper on Conservatism in Medicine.

Dr. S. B. Munn also read a paper on Exanthemata, and set forth the character of Small Pox and the utter inutility of vaccination as a prevenative. The example of Montreal had shown this.

Dr. T. J. Batchelder, of Maine, also presented a paper on Infantile Disorders; after which the Section rose and reported to the Association.

The Electoral Committee—two from each State and one from each medical college—was appointed, and made choice of the following officers: President, Lorenzo E. Russell, M. D., Springfield, Ohio; Vice-presidents, Theophilus J. Batchelder, M. D., Machias, Me., Jasper N. Adkins, M. D., Lampasas, Tex., Mrs. Henrietta K. Morris, M.D., 998 West Madison street, Chicago, Ill.; Secretary, Alexander Wilder, M.D., Newark, N. J.; Treasurer, James Anton, Lebanon, Ohio.

Waukesha, Wis., was selected as the next place of meeting.

The officers were then installed, and made suitable addresses; and a recess was taken.

The afternoon session was devoted to professional discussions. A resolution was adopted, suspending the formation of Sections for one year. The interest was unabated till the hour of final adjournment.

This has been, in many respects, the most important meet-

ing of the Association for many years. The attendance was the largest yet witnessed ; there was less than the usual straggling, and, at the same time, little angry disputing. In these respects the improvement was decided.

The Iowa Eclectic Medical College was, on recommendation of the Standing Committee, placed on the catalogue of institutions entitled to representation in the Association.

About two hundred new members were elected, and it is to be hoped will promptly ratify the action.

Eclectic Medicine is a power in the United States, and can not be slurred and passed over slightingly by arrogant rivals. The *Atlanta Constitution* very justly remarks : "The convention has been in every way a satisfactory one to the members, and Atlanta was glad to have the physicians with us."

GEORGIA ECLECTIC MEDICAL ASSOCIATION.

The State Association met on Tuesday, 15th June, at the College Hall, 48 Butler street, Atlanta, pursuant to the call of President A. L. Nance, M.D. The attendance was large and full of working men.

The meeting was called to order by Prof. A. G. Thomas, M.D. After the invocation of the guidance of the Supreme Architect of the Universe, the Convention was placed in working order by President Nance, who delivered the annual address. President Nance dwelt on the superior importance of organic union and professional fellowship of all the elements of liberal medicine in the State. Electicism in medicine is the true basis of medical progress. It ignored bigotry, intolerance, exclusiveness, and stretches forth its arms to encompass the whole arena of medical science and include everything that is of value and utility in the cure of disease and that promotes longevity.

Prof. W. M. Durham, Secretary of the Association, called the roll. Among those who answered we can recall the following: R. M. Auten, Ellijay, Ga.; J. Adolphus, S. T. Biggers, Atlanta; J. M. Buchan, T J. Buchan, J. W. Buchan, Eastman; T. J. Collins, Towaliga; I. L. Couch, Atlanta; Wm. DeLay, Walesca; G. W. Delbridge, Atlanta; S. D. Durham, Maxeys; J. T. Dodd, East Point; S. P. Downs, Monticello; W. C. Fischer, Bolton; Rosa Freudenthal, Atlanta; I. J, M. Goss, Marietta; John H. Goss, Decatur; I. G. Goss, Thos. D. Goodwyn, Oakland; A. F. Green, J. F. Hammond, Atlanta; J. F. Harris and J. C. Harris, of Suwanee; I. H.

Hand, Milford; R. T. Hillman, Senoia; A. D. Johnson, Chas. J. Johnson, Atlanta; J. D. Ketcherside, Martin; R. M. Moore, Moore's Mill's; M. C. Martin, Atlanta; A. L. Nance, Jug Tavern; F. T. Powell, Atlanta; R. Y. Rogers, Westville; J. F. Roughton, Atlanta; J. M. T. Smith, Lost Mountain; W. A. Smith, Atlanta; B. M. Sprayberry, East Point.

The following new members were enrolled: Jos. H. Hand, Milford; J. B. George, Searcy; J. C. Montgomery, Chauncey; E. W. Watkins, Ellijay; R. D. Abernathy, J. A. Warren, E. W. Greer, H. H. Greer, J. W. Carmichael, S. H. Harris, Atlanta. In the hurry to make up the report we have no doubt overlooked many names that should be on the above list. Among the vast throng present, were Prof. Alexander Wilder, M. D., Newark, N. J., Secretary of the National Association; Prof. J. R. Borland, M. D., of Franklin, Pa.; J. W. Stone, M.D., the urbane representative of Parke, Davis & Co., Detroit, Michigan; Prof. J. R. Duncan, of Indianapolis, Ind; Miss (now Mrs.) Lizzie Abbot, M. D., a graduate of Georgia Eclectic Medical College, Bremen, Alabama; Jas. Anton, M. D., Lebanon, Ohio, Treasurer of the National Association; S. B. Munn, M. D., Waterbury, Conn., who was accompanied by his esteemed daughter; J. T. Bacheldor, M.D., Me.

The Mutual Aid Society of the National Eclectic Association was fully discussed and its advantages to members of the National who desired to enter it, were fully brought out. It is, in fact, a life insurance association and vouchsafes a certain sum of money to the heirs of deceased members. Several new names were added to its roll.

Our Northern, brethren who honored the Association with their presence and counsel and participated in the deliberations, found occasion to speak words of praise and utter enconiums on the energy, industry and progress of Eclecticism in the South.

Prof. Wilder spoke powerfully of the growth of Eclecticism in the United States. He said that the greatest thing in the world was the manner in which one profession antagonizes and criticises another.

Addresses were made by Drs. James Anton, J. R. Borland, J. T. Bacheldor, S. B. Munn. W. H. Lamar, of Ala., spoke of the splendid progress Eclecticism was making in his

State, and the victories it is winning over its old and wily antagonist, all of which were owing to the organization of liberal physicians and the superior merits of the practice of Eclectic physicians, that the people fully recognized there is a marked distinction between the practical and available usefulness of the New over the Old School, and appreciate the worth of the New School.

Prof. Borland spoke on the objects and progress of Eclectic medicine. He gave an interesting resume of the history of the Georgia Eclectic Medical College, of which he was once the dean of the faculty, and spoke of its wonderful progress and the high position it has attained in the profession as an educator. From the small beginning of occupying a room in the third story of a building on Peachtree, it has risen to the proud eminence of owning a fine college building, well equipped and officered, all through the indomitable perseverance of the true men who have the interest of Eclecticism at heart. Its growth and prosperity are really phenomenal, and are due to its sterling merit as an educational institution.

Dr. S. B. Munn spoke on the purposes and progress of the Eclectic medical profession, that its methods and means were the best now known of treating the sick, because it shows up the highest average success in the healing art and in preserving health. It is rational in all its concepts and methods of practice. He pronounced an encomium on the labors and progress of the Eclectic physicians of the South and the institution the profession has established in Atlanta. He pronouced Georgia a great State, and believed the Eclectic physicians of Georgia the peers of the doctors of any other section.

He spoke of the medical laws now in force in several States, and showed that the Old School were aiming by intrigue and machine work to gain exclusive control of the whole medical field in the United States so that they might check and finally crush out honorable and educated rivalry. Eclecticism antagonized no school or system that works on the line of honorable progress and advancement. It embraced the whole field of progress and welcomes all enlightened and liberal progressive workers in the medicinal field.

Dr. James Anton, Treasurer of the National Association,

spoke encouragingly of the progress of Eclecticism and assured his hearers that compact union and organization of the Eclectic medical profession in all the States would eventually place the Eclectics at the foremost advance of the medical profession. He was gratified to see the splendid progress the liberal profession is making in the South and felt that the work is in good hands. He said the National is our rampart, and the South will be among its chief supports.

A number of excellent papers were read by members. On Infant Feeding, by Dr. R. M. Auten; on Hemorrhoids, by Dr. I. J. M. Goss. These papers were discussed, Drs. Munn and Hand taking part. A paper on the new treatment of hemorrhoids, by Dr. R. M. King, of Alabama, was read and discussed. An elaborate paper on Malarial Hæmaturia, by Prof. I. H. Hand, was read and received marked attention from the audience.

The afternoon session was occupied in the discussion of many practical topics on Surgery, Gynæcology, Urinal Analysis, Bright's Disease, Chronic and Acute, Infantile Pneumonia, New Remedies, Puerperal Fever, Points of Physiology, etc. Many of these topics were of excellent merit and will be from time to time brought out in the JOURNAL as we have time.

Dr. Bacheldor, of Maine, addressed the Association in an eloquent speech on the Progress of Liberal Medicine in the Eastern States. Prof. Duncan also spoke in glowing terms of the prospects of the Eclectic School of medicine and urged Eclectic physicians to industriously promote and carry on a complete system of organization.

The Association concluded its labors after a hard day's work, and men never worked harder and more systematically than they in the time allotted to their work, they electing a full delegation to represent the Association in the National, whose names will be given in the proper place.

The officers chosen for the ensuing year are: President, R. M. Auten, M. D., Ellijay; First Vice-President, I. H. Hand, M. D., Milford; Second-Vice President, Allen D. Johnson, M. D., Atlanta; Secretary, W. M. Durham, M. D., Atlanta; Treasurer, W. C. Abernathy, M.D., Atlanta.

By request, Prof. Alexander Wilder installed the President in a neat little speech, President Auten replying gracefully and to the point. After this the rest of the elected were put in position in due form.

Finally the Convention passed several resolutions of thanks to its Northern visitors for their courtesies and valuable assistance.

Payé comptant

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ORIGINAL COMMUNICATIONS.

MALARIAL HÆMATURIA—SPORADIC YELLOW FEVER—SWAMP FEVER—BLACK JAUNDICE, ETC.

History, Causes, Symptoms, and Treatment.

BY J. H. HAND, M. D., MILFORD, GA.

[Read before the Georgia Eclectic Medical Association, June 15, 1886.]

This particular form of malarial fever has not received the careful study that its serious character and fatal results demand of the profession.

I am not aware that any reference has been made to it in any work on the Practice of Medicine by any of the various schools of medicine. A few articles, appearing in different medical journals, comprise the whole literature of the subject.

The writer has had this form of malarial disease under observation about twenty-five years. In several respects it has a striking resemblance to yellow fever, the typhus ictorodes of Cullen. It is limited to certain localities subject to high temperature for a considerable part of the year—from the first of June to the middle of September—a temperature of an average mein of 65° to 75° F. The locality comprises a belt lying South of 32° N. L., from the Atlantic to the Pacific Coast. This section is characterized by great atmospheric humidity; the country is interspersed with ponds, marshes, river-bottoms, and stagnant waters and sluggish streams.

It has been observed that the disease is more violent and general in the Summer and Fall months that have been preceded by very wet and hot Spring months.

It was unknown in South Georgia in the first settlement of this section. It made its appearance here in 1860 or 1861, just after

extensive areas of forest had been cut down, and many large plantations had been established, exposing extensive plains of soil to the direct rays of the sun.

The points of resemblance between malarial hæmaturia and yellow fever are, its limitation to circumscribed localities; prevalence at particular seasons of the year; the accompanying jaundice; the gastric symptoms, including the "black vomit" and the secondary fever. The tendency to hemorrhage is less marked. The points of dissimilarity, its non-infectious character; it is sporadic, and always attended with hæmaturia; it is frequently intermittent, and prevails more extensively in the country or small country villages. Its ratio of mortality is, perhaps, quite as large as that of yellow fever. It does not attack persons in robust health, but seeks as its victims the feeble and debilitated.

A study of its history, causes, and character, leads to the conclusion that it is a zymotic affection. It is endemic and spordic, and is met with in both the sthenic and asthenic forms.

CAUSES.

A review of the history of this disease leads to the conclusion that paludal and climatic influences are largely responsible for its development. If we claim that it is due to miasm we only plead our ignorance of its cause, as we do not know what miasm is. In the search for the cause of this affection, it will be well to consider the effects of the influence of the long-continued high grade temperature and the moisture of the atmosphere upon the animal organism. The relaxing effects of these agents upon the animal tissues and fluids, and the disturbances that would be likely to result, in the relations between the nerves and circulatory system would probably lower the functional activity of both nervous and circulatory systems. The effect of this would be to diminish the activity of nutrition and assimilation. It would also have the further effect of lessening the elimination of the waste products of the system. This accumulation and retention of the debris of the organism would doubtless add to the disturbance of the equilibrium of the relations between the forces and matters of the body. The influences of heat and moisture would at the same time favor an active germination, growth, death and decomposition of numerous species of both vegetable growths and animalcular structures of a low order, which may be the source of that unknown something—miasm.

Whether the disease owes its origin to either or to both of the

causes combined is an unknown problem; but we know that these are the circumstances attending the origin and prevalence of the disease. Race has its influence; so far the negro has enjoyed immunity from this disease. This is significant in relation to the study of causes, showing that poverty, filth, and an improper dietary are not, at least, prolific causes.

Whatsoever lowers the standard of health, enlarges the susceptibility to attacks—recurrent attacks of fever and chills; the excessive use or the abuse of spirituous potations, fear and despondence, constant exposure to the direct rays of the sun, may all be regarded as exciting causes.

SYMPTOMS.

The primordial in this affection varies from three or four days to as many weeks. The appetite declines, the disposition becomes peevish and fretful; there is a sense of weariness, lassitude, and a dull headache; the headache may go off at night, but sleep is disturbed and does not bring refreshment; the skin is sallow, the tongue coated; the circulation falls below the normal state in force; it quickens a little. This condition is followed by chilly sensations alternated with flashes of heat; nausea adds to the discomfort; or there may be a decided chill, which is attended with increased headache, nausea and vomiting; respiration quickens, arterial excitement follows, and the pyrexial stage displaces the chills; the paroxysm declines with the sweating stage. In quite a number of cases the hæmaturia is absent during the first and second paroxysms; but more frequently it occurs during the first, and it frequently occurs with children before they take to bed. There are comparatively few cases of the intermittent form that do not pass into the remittent, though the chill stages still continue to occur at irregular intervals, from three to twenty-four hours. The lightest attacks present the leading characteristics of the affection—nausea, vomiting, jaundice, and hæmaturia. It is met with in both the sthenic and the asthenic grades; but this is a distinction, however, that is rather calculated to mislead than to give practical information, as the disease appears in every degree of violence from the mildest intermittent to the most fearful state of congestion and collapse.

The nausea and vomiting come on during the chill stage, followed by the hæmaturia and the jaundice, which is first apparent in the conjunctivæ; the yellowish hue grows darker hourly; thirst soon becomes tormenting, is insatiable; the face is flushed,

eyes inflamed, and often swoolen; pain in the head is often distressing; respiration is hurried, and attended with frequent sighing or an effort to fill the air cells of the lower lobes of the lungs; there is a distressing sense of want of breath; the pulse rises to 100 or 130; the temperature rises rapidly to 100° or 105°. As the sweating stage supervenes, there is more or less modification of all the symptoms. There may be now an hour or two of repose and comparative comfort; the renal discharges continue to be blood-stained or decidedly bloody. In a few hours the paroxysm is repeated; they recur at irregular intervals, from the onset to the third, and, in some cases, to the sixth day, when there is usually a decided decline in all the symptoms. The jaundice begins to fade, nausea and vomiting abate, the hæmaturia ceases, the pulse falls nearly to the normal rate, the patient may call for food and eat with some degree of relish. This temporary respite continues from twenty-four to thirty-six hours, and the attack is renewed, often with increased violence, with a renewal of the nausea, vomiting, hæmaturia, and with increasing debility.

It is probable that the disease would terminate favorably without a secondary fever if the poisoning was not renewed by the absorption of the exudation. The evidences of blood-poisoning in the secondary fever is more positively expressed than it is in the primary fever. The life of the patient depends upon the rapid elimination of the waste products, together with the altered and decomposing blood and lymph exhaled from the circulation. In the form of this disease which the terms asthemic, malignant or typhus, have been applied the primary stage is so exceedingly violent that death often ensues in from four to twelve hours. The skin and conjunctivæ become nearly black within a few hours, nausea and vomiting are deathly; from one to three or four pints of dark blood are voided within three or four hours; black vomit begins early; the pulse is thready and rapid—125 to 140—scarcely perceptible at the wrists; respiration is labored; carbonic acid poisoning soon ends the struggle in death.

DIAGNOSIS

Is not, ordinarily, difficult after the disease is developed. It is to be distinguished from jaundice with malarial fever by the hæmaturia, the vomiting, and irregularity of the paroxysms; and from yellow fever it may be differentiated by the hæmaturia—its

sporadic character, its being non-infectious, and the absence of that epidemic.

PROGNOSIS.

It may be stated as unfavorable. When, however, the attacks are light, and the paroxysms are short and occur at regular intervals at from twelve to twenty-four hours, with subsidence of the nausea and vomiting during the remission, and when a fair degree of strength is maintained, it is favorable. The pathology of this affection has not received that attention from the profession that its fearful mortality demands. The disease is not noticed in medical works; a few contributions to medical journals comprises its literature.

TREATMENT.

Every physician treats it according to his own views; but little success generally has been attained. It should be remembered that it is due to blood-poisoning, characterized by extreme debility, the walls of the blood vessels leaking at every pore. The nutritive fluid is fomenting, poisoned; how, then, can a depletive procedure bring relief? Yet it has been pushed, and death is the inevitable result. Ignorance of the character and causes of the disease is demonstrated by the treatment. *No treatment* is less fatal. When the nausea-retching is constant, if the stomach has not been relieved of its contents, it is best to give an emetic of lobelia and ipecac. Tr. lobelia, gtts. xxx, diffuse ipecac, grs. xx, in a cupful of warm water; give two teaspoonfuls with the gtts. xxx of tincture of lobelia every half an hour till the emesis occurs. If the nausea continues after vomiting, give copious draughts of water as hot as can be taken; this will often quiet the stomach and aid in rinsing it out well when vomiting occurs. If the cold stage is persistent and the pulse weak, give essence of ginger, gtts. xxx, in ʒ ij of brandy; repeat every half hour till chill passes off. It will shorten the chill stage to apply bottles of hot water around the patient. To control arterial excitement and induce perspiration, gtts. xv of tincture gelsemium may be given in half a wineglass of water, every hour till vision is affected; or, ℞. grs. xv bicarb. pot. dissolved in fl. ʒ ss aq.; fresh lemon juice, ʒ ss; aq. ʒ ss. Mix lemon juice and water in another glass; add the solution of bicarb. pot. to the lemon juice and let it be taken while effervescing. Repeat every two hours until free perspiration comes on. This often relieves nausea, and

produces a quieting effect. To relieve the bowels: R. Rhei, pulv. grs. ij; lept. gr. i; podophyl. gr. ⅛. Mix; f. pills i. Sig. One to be taken every three hours till bowels move. Let this be followed with quinia in solution: R. Sulph. quinia, grs. xx; aq., fl. ʒ iss; acid sulph., diluted, *m.* xx. Mix. Sig. ʒ i every three hours; or, R. The sulph. quin., grs. xx, and tinct. ferri chloridi, m. c. aq. dist. ʒ iiss. M. Sig. One teaspoonful every two hours, with the quinia.

In the secondary fever—a period of active sepsis, when the vitality is fearfully depressed—the pulse is small, compressible, and very rapid, so that it cannot be counted. In a case like this, Dr. J. H. Hand, of Georgia (see Eclectic Journal, of February, 1886), gave verat. vir. tr. gtts. iij; tr. hyoscyamus, gtt. i, every hour, which succeeded in bringing the pulse from 150 to 120 in four hours; at the same time there was a decided decline in the violence of all the most threatening symptoms. Gelsemium and other agents of its class had failed to maintain a sedative effect over arterial excitement. In the commencement of the secondary fever, iodine comp. sol. (liquor iod. comp.) or baptisia tr. are both remedies of value. The iod. comp. sol. may be given in from 3 to 5 minims every two hours, both for its tonic and antiseptic effects; or the baptisia tinct. in x to xv *m.* every hour or two. Brandy or diluted alcohol, capsicum or ammonia should be resorted to as stimulants. Quinia is indispensable in the depressed state of the vital forces. A teaspoonful or two of brandy every hour, as long as it is retained; quinia in 2-grain doses every four hours, and tr. of hydroclor. ferri every four hours, dose *m.* x, may be given with the quinia.

The kidneys often fail in their secretions after the exudation ceases—the result of inflammation. This difficulty arose more frequently as an effect of the injudicious use of spirits of turpentine. The comp. infus. of buchu: R. Buchu fol. ʒ ij; aq. bul. Oss; pot. bicarb. grs. lx. M. S. Dose, one tablespoonful every half hour, with *m.* xxx spts. nit. dulc., in a wineglass of water.

In other cases there is suppression of urine, from urethral difficulties, either inflammation or spasm. The catheter must be used and the above treatment continued. The effervescing draught, with spts. nit. dulc., often has a happy effect upon the kidneys and skin in the progress of this disease.

When the disease continues beyond the twelfth or fifteenth day, it assumes a typhoid appearance, and occasionally earlier;

there is extreme debility, the tongue has a brown or black fur in the center, the tip and edges red, or the fur may have cleaned off leaving the tongue deep red and shining, the skin dry a part of the morning and afternoon; there is a shrunken appearance about the eyes; there is more or less muttering delirium at night, which may continue throughout the day; pulse varies in force and frequency, from 100 to 120; there is arterial tension; the bowels may be constipated—seldom the opposite; abdomen often shrunken, sometimes tympanitic; urine scanty, varying in color from a deep lye to a light straw color; there is some tenderness of the epigastrium. At this stage there is a tendency to abscess formation—the submaxillary and cervical are most frequently involved, the parotid occasionally. Quinia and iron should be used in tonic doses; turp. emulsion in half teaspoonful doses every four hours; verat. vir. in half minim doses every hour till perspiration sets in; or, tinc. gels. *m.* v to viij every four or five hours. Cypripped. valerian, or passion flower, may be given to induce sleep, in teaspoonful doses of the tincture; or, ℞. Tinc. cypripped, fl. ʒ i; bromid. pot. grs. i. M. S. To be given every three or four hours; or sulph. morph. ⅛ or ¼ gr. at bedtime.

When the skin is dry and harsh, bathing with tepid soda water and drying the surface briskly with friction, is often beneficial.

DIETARY.

The diet should consist of buttermilk, fresh, and kept cool, one or two ounces four or five times per day; or acid fruits, oranges and lemons, grapes, etc. No solid food is admissible until the disease is broken up. During convalescence broths and soup may be taken.

The abscesses usually require from three to four weeks to run their course. They should be poulticed with flaxseed meal or other softer emolients, and opened as soon as the pus has formed. Iod. of pot. or soda, in some form, should be given until convalescence is well advanced.

There is, perhaps, no other disease in which the digestive power is so completely exhausted; it is, therefore, necessary that the diet should be guarded. In consequence of the altered and suppressed activities of the assimilative functions, and the suppression of waste, or the suppression of the eliminative power, it is exceedingly difficult to sustain the vital force until the septic agents are eliminated. This is, perhaps, the most serious difficulty met with in the treatment of malarial hæmaturia.

MY POCKET CASE—CONTINUED.

BY L. J. M. GOSS, M. D., MARIETTA, GEORGIA.

Colocynthis—Bitter Cumber.—This remedy acts through the abdominal sympathetic nervous system, also through the cerebro-spinal center. In large doses, its toxical or pathogenetic effects are to produce violent hydrogogue catharsis, and if long continued in large doses, it finally produces inflammation of the intestines. It is also apt to produce peritonitis. It produces also hyperæsthesia of the spinal nerves, resulting in neuralgia. But in less doses, it acts through the cœliac plexus, and the sensative filaments of the vagi upon the mucous membranes and the muscular fiber of the intestinal canal, and through the intestinal glands it produces catharsis. The stools are mucous and watery and accompanied with colicky pains. In very large doses it produces violent irritation, and finally inflammation of the alimentary canal and, if continued, it finally causes death. It produces violent pain about the umbilicus, of a twisting, burning character, relieved somewhat by the watery evacuations. The cathartic effect is attended with violent tenesmus.

Therapeutics of Colocynth.—The neurosis, especially where pain is the prominent symptom, are its sphere of action. In colic about the umbilicus, characterized by a twisting, burning pain, colocynth, in small doses, say 1 to 2 gtts. every hour is called for, until it gives relief. It often is indicated in sciatica, where the pain is cutting and burning, as it often is in this affection. In dysentery, where the dejections are slimy, bloody, and like the scrapings of a hog's intestines, colocynth, in very minute doses, ½ to 1 gtt., every hour, will aid the cure. In watery diarrhœa, with pain like colic, a few doses of this remedy will often arrest the diarrhœa.

Coto Bark.—This is one of the grand remedies introduced by Parke, Davis & Co., of Detroit, Michigan, and has proven a most powerful astringent in diarrhœa. The dose is 1 to 10 gtts. every two or three hours. In profuse sweating it has proven very efficient in many cases. Even in the colliquative diaphoresis of phthisis pulmonalis it has given good results. In cholera morbus and cholera infantum it has served me well when alternated with the syrup of rhei comp.

Convalaria Majalis—Lily of the Valley.—In doses of 5 to 10 gtts. this article has done good service for me in diseases of the

valves of the heart. It lessens the frequency of the heart's action. And in cases where there is feeble capillary circulation, and œdema or dropsy, this remedy acts promptly. It often acts on the kidneys in such cases, and thereby aids in getting rid of the fluid in the body.

Cubeba.--Cubebs, in substance, in doses of 5 to 10 grs., exerts a fine influence upon mucous tissues, especially those of the bladder and urethra. I often use it in chronic gleet and gonorrhœa with happy effect. In chronic cystitis it may be often alternated with the benzoate of soda or ammonia. I often use equal parts of the tincture of cubebs, oil of sandal wood, and kava-kava in gonorrhœa with success.

Croton Tiglium.—I use the tincture of croton oil, say 1 to 16 ℥ of (98°) alcohol, in doses of 1 to 2 gtts., with good effect in hepatic colic, diarrhœa or dysentery. In pustular diseases of the skin, it often proves one of our best remedies. In large doses its toxical effect is to purge severely.

Cuprum—Copper.—This is one of the constituents of the body, and, like iron and other elements, is sometimes deficient, and must be supplied to produce health. It is indicated by a pallid or tawny skin, a greenish tinge of the skin, broad, pallid tongue, and torpid bowels and soft pulse. Copper, in a finely divided state, absorbs large quantities of ozone. Physicians in the cholera districts, knowing that ozone was deficient in quantity, have given this metalic salt in various forms, and it is affirmed, with successful results. It is even said to act as a prophylactic. It is only applicable in the first stage. Copper, in a finely divided state, has the power of absorbing large quantities of oxygen; hence, its life-giving power is to be accounted for upon a natural law. Given when it is indicated, it acts as a functional remedy, as an ozone-bearer, and consequently, a life invigorator. When it is in the blood it takes from the air in the lungs more ozone; hence, its action in anæmia and chlorosis. And this property accounts for its curative effects in syphillis and epilepsy. The dose of the sulphate is from 1-30 to 1-40 of a grain, and it should not be continued too long, as it is liable to produce paralysis.

Cistus Canadensis—Rock Rose.—This article is one of that class of remedial agents that most powerfully stimulates the process of waste and nutrition known by the familiar term of *alterative.* It is of much value in scrofula and struma. It aids

in correcting that abnormal state that consists in the deposit of imperfectly formed plasma. Alternated with scrofularia, it is of special utility in scrofulous affections.

Corydalis—Turky Pea.—Corydalis is another remedy in that class that hastens downward metamorphosis. In secondary syphilis, it has proven valuable, especially in syphilitic nodes, succeeding sometimes where the iodides have failed. In doses of 10 gtts. of the saturated tincture, three times a day, the nodes soon disappear. It often removes syphlitic and scrofulous eruptions from the scalp. It is likewise curative of ulceration of the mouth and fauces of a syphilitic character. It is better adapted to secondary syphilis than primary. It has proved valuable in obstinate cutaneous affections, in the chronic form. It is also applicable in cases of gastric catarrh, in small doses, say 5 gtts.

Digitalis—Fox Glove.—I use the aqueous extract, preserved in one-fourth volume of alcohol. In doses of 5 to 10 gtts., digtalis is a heart tonic, and useful whenever the heart acts feebly. In large doses it is a dangerous sedative to the heart. It influences the capillaries, and aids absorption of dropsical fluid, and acts on the kidneys, and hastens elimination.

Dioscorea Villosa—Wild Yam.—The principal use of this article is in bilious colic (so-called) or cramp of the umbilical region, which is not, as has been supposed (as the name implies) the fault of the liver every time, the vomiting of bile being the symptom resulting from the spasmodic retching in vomiting. When the pain of colic starts in the umbilical region, though it may radiate all over the abdomen, yet discorea will readily relieve it. I usually alternate the tincture of colocynth, 1 gtt. of the saturated tincture, with the dioscorea, and I have been delighted with this treatment. As a popular colic remedy, I mix 1 ʒ each of the tincture of colocynth and dioscorea with 1 ʒ of simple elixir, and give in doses of 5 to 10 gtts. to children, and 20 to 30 gtts. to adults, every ten minutes.

Delphinium Staphisagria—Stavesacre.—The saturated tincture of the seed of staphisagria has a direct affinity for the reproductive organs, especially that of the male. I have used it with good effect in several cases of prostatitis and spermatorrhœa. It relieves nervous irritation and hyperæsthesia, which always exist in the above morbid conditions. It allays the inflammatory excitement in acute cases. The dose is from 1 to 5 gtts.

Drosera Rotundifolia—Sundew.—Drosera, in the form of a tincture, acts as a mild demulcent, and allays irritation of the bronchi following measles and whooping cough. It is indicated by a dry and tickling cough. I have used equal parts of drosera, sanguinaria, and lippia mexicana, with an equal measure of simple elixir, and given in doses of 20 to 30 gtts. every two or three hours. This combination will do good service in chronic bronchitis.

Dulcamara—Bittersweet.—Dulcamara is a wild narcotic in large doses, but in small doses I use it in dry, scaly skin affections, and have found it of much value. The dose is 5 to 10 gtts. I use the saturated tincture, or fluid extract.

"TRUE PRINCIPLES OF MEDICINE."

BY R. C. BRYAN, M. D., PERRY, GA.

The human body is built up of animal and mineral materials, and kept in motion by the action of a specific power, which we call life or the vital principles—tis vital. This vital principle manifests itself in the action of the nerves and muscles, and the heart and arteries, and their dependents, which total produce all the processes of digestion, absorption, circulation, secretion and excretion. While there is no obstruction of any kind to the action of the nerves, the muscles, or the blood-vessels, we are in perfect health. In other words, that *condition* of the body in which every portion and fibre is able to perform its full office and duty is termed health. If any portion of the body is unable to perform its duty, it is said to be diseased, and this inability, no matter in what form, nor in what organ it exists, is disease. Anything or power which in any way obstructs the full and free action of the vital force in any part of the body, that prevents it from performing its duty, is a *cause* of disease, for when an organ is for a time beyond its natural endurance prevented from performing its proper office, it loses its power to perform it, and then it is diseased or hindered from the performance of its duty; the vital force makes through the other parts greater efforts than usual to remove the obstruction. If some of the sensitive nerves are enthralled, they or others make efforts to remove the thraldom. These efforts produce an uneasiness, which we call irritation or nervousness. If that uneasiness is severe, we call it pain. If the obstruction is in or

about the small blood-ripples, the heart and arteries make increased efforts to remove it, and this effort, if general, we call fever; if local, we call it inflammation. The irritation, fever and inflammation being efforts of healthy parts to remove obstacles from the unhealthy, we consider them *friends* to health, and all our treatment is designed to aid them in removing obstructions, and restoring to the diseased parts the ability to do their duty. Disease, then, is an impaired condition of the system, and not impaired vitality. Is not vitality always sufficiently checked by disease? The only diseased action is *chemical* action; and all other action in the system is vital and tends to the restoration of the parts to their normal action; and *disease*, then, itself is a *state* of impaired vitality. Fever, then, is not disease, but nature's sanative effort, the *cause* of which is the vital force. Health, when the surface of the body is in perfect order, the blood flows freely and fully to it, the nervous papillæ are not annoyed, they cause no contractions; and, hence, the perspiration passes readily through the cutaneous exhalants, carrying out the impurities which they may contain in solution, and thus prevents them from irritating the nervous papillæ, the action of which on the cellular and dermoid tissues, would cause them to contract and check the depurations. Now the blood would accumulate under the surface, irritate by its friction, by its heat and by its stimulating power and its mechanical pressure, and produce an uncomfortable state or condition of the tissues. The incapacity of the capillary and cellular vessels, to pass the blood into the veins, and of the cutaneous exhalants to eliminate the sudor is the essence and the sum of the disease in this case. It is the true malaise, maladie—malady. It is true that the heart, not being aided by a free capillary removal of the blood as fast as it procedes to those capillaries, labors like a wheel in back water; being able to throw less blood at a time, it throws what it can more frequently. Heat, some swelling and afterwards some redness are manifested; the nerves excited by the accumulated blood complain in a language which we call pain, but these are not diseases, but only the signs of vital effort to remove the *causes* of the suspension of the circulation; that is, *the disease*, which is not a remedial effort, but an opponent or obstacle to remedial effort. There are two ways of removing these obstructions. One is by arresting the inflammation and accumulating obstructions, thus aiding the chemical affinity

to overcome the vital and producing death. Tthe other is by aiding the *inflammation* to remove the obstructions and restore normal action to the parts—producing health. The one is Allopathy the other Reform. Inflammation and fever are simple processes and always essentially the same. You may associate them with different processes and circumstances, but that does not change their nature nor their actions any more than mingling gold with silver makes it any other metal than gold or change its inherent properties. Do not, then, collect all the appearances, actions, changes and results manifested both by the disease and the vital action such as dry, dark tongue, fœtid breath, tender bowels, diarrhœa, sleeplessness, etc., and call them typhoid fever. Split apart those things that differ as widely as day and night from each other and give to each its appropriate name and treatment, and then shall we be able to discover the true principles in medicine and adopt a practice in conformity thereto.

ELECTRICITY IN MEDICINE—NO III.

BY GRIFFITH W. D. PATTERSON, PH.D., ATLANTA, GA.

The JOURNAL or the printers of the JOURNAL made me say, in the May number, that the equation of Ohm's law was Q E–R. It should have read $Q = \frac{E}{R}$; that is, quantity is equal to Electro-motive force divided by resistance. Again, they have used the letter X for the plus sign in every place that the plus is thus designed to be represented.

In endeavoring to explain the meaning of Tension or Potential, I know that I have the bugbear of electrical nomenclature; one that, from an indefinite comprehension of which has resulted in much confusion to the uses of batteries or instruments of all descriptions, and yet one very important to understand, as it differs so widely from the commonly accepted theory. Most operators consider that volume or quantity is tension; but such is not the case, as I shall, I hope, make plain in this article. Tension or Potential is the difference in electric level between two objects, and the earth is taken and the standard as zero (*o*). It refers to the ability or power of the current to overcome resistance, and to its pressure or penetrating power.

In the Static and Galvanic form it may be more readily comprehended than in the Faradiac, because there is a reasonable

explanation for the former two, but no comprehensible one for the latter.

In the Static, if a receiver is charged with positive or negative electricity, the greater the charge the greater the Potential or tension as regards the earth, and the greater is the pressure to establish an equilibrium, as is also greater the power to overcome the resistance to the establishment of the electric level. So, if we take two receivers dissimilarly charged and approach them near enough to each other to allow a discharge as between them, the greater the potential or difference in level the greater the tension with which the level will be established, as the greater amount of current must pass in the same time that a smaller amount will. We may liken the potential here to a body of water held in a reservoir or by a dam—the higher the dam the greater the potential, as it is so much more above the level of the main current below, or the earth. Could the whole face of the dam be removed at once, and the water thus be allowed to flow into another dam or reservoir capable of holding the waters thus turned loose, it would establish an equilibrium as between the two as quickly as a smaller amount of water turned loose in a similar manner. This, then, is Tension in Static Electricity—ability to establish equilibrium. Potential may be called difference in level; Tension, the ability to establish a level, and may mean pressure or force. Thus potential and tension cannot be dissociated, but are, as it were, component parts of each other. I wish to be distinctly understood that, by pressure or force, tension, I do not mean volume any more than I do when, in explanation, I use water bodies; for the same volume of water may be confined in a very broad, long, shallow reservoir, or in a narrow, short, deep reservoir, and, as between the two volumes, the latter will possess the greatest tension, and move with the greater rapidity and pressure.

In Galvanic Electricity, the potential of a battery is governed by two qualities, the elements of which it is composed, together with the exciting fluid and the arrangement or manner of connexion of the elements of the different cells.

In all galvanic batteries used in medicine there are two elements—the positive or generating element or plate, usually zinc, and the negative or collecting element or plate, for which one of several elements may be used, but carbon, copper or platinum are those most commonly utilized. If we take zinc as the positive element, and carbon as the negative, the difference in po-

tential between these two elements is much greater than between zinc and copper, as carbon is more negative in the elementary electrical series than copper, so the tension is greater as the elements may be wider apart in the electrical lines, and the strength or nature of the exciting fluid as it rests upon the generating plate is another component of tension as it sets free the gases or decomposes the water of the fluid more rapidly.

If, then, we have the elements widely separated as to their positive or negative state, and the exciting fluid best adapted to the combination, we have the tension of each cell that may compose or make up the battery; next as to the mode of connexion of the elements of one cell with the elements of another cell in a a series of cells in order to secure an increase of tension; to do this, the negative element of the first cell of the battery or series must be connected with the positive element of the second, the negative of the second with the positive of the third, and so on for as many cells as it is desirable to include for the work to be done. It would appear as if each cell would increase the quantity of electricity, or its volume, but it has been proven by experimentation that the volume of the fluid is not increased, but that its pressure or tension is increased. How the volume is increased will be explained hereafter. Each cell so connected adds not to the volume of the fluid, but to the height of pressure of tension of the electric fluid. If a dam (say) is 10 feet high and a pipe 12 inches in diameter is placed in the bottom as an outlet, and the water behind the dam kept on a level of 10 feet, the water flows with a certain pressure or force, as under the 10 feet of potential increase height of dam and potential of water to eleven (11) feet, and the water will flow with increased pressure through the same pipe, and so to each added foot of water pressure or increased difference of lever will be an increased force or pressure through the 12-inch pipe. So with the cells of a galvanic battery, connected as described, each added cell increases the pressure and difference of level. This is increase of tension. As in water there is a slight increase in the amount of water passing under an increased pressure, because of its more rapid movement consequent upon its ability to overcome resistance; so with the electric current, each added cell may increase the amount of electrical current passing very slightly as it passes or flows more rapidly under the greater ability to overcome the resistance it may meet to its passage; yet the resistance of each added cell

almost, if it does not quite, counterbalance the quantity, so we have only increased tension.

In the Induced or Faradiac current, the tension is increased by decreasing the diameter and increasing the length of the connecting wires composing the coils. A current passing over a short, thick wire has little or no tension; passing over a long, fine wire, in the coil, the diameter of the wire decreases and the length increases. How the fineness and length of wire increases tension has, as yet, not been satisfactorily explained (there are theories), but that it does make the current more penetrating is a known fact.

ERYSIPELAS OR RHUS POISONING—WHICH?

BY J. W. SHAW, M. D., GRAVEL RIDGE, ARK.

On May 11 was called to see Laura B——, aged three years. The history of the case is as follows: For some two or three weeks past the child has had three or four very small sores on the lower part of her left leg, which, on the 9th of this month, became very red around the edges, which redness continued to extend until the entire leg below the knee was affected. There was considerable fever present during the first two days. The parents had exhausted all the domestic remedies at their command, and every thing which was recommended. The swelling and redness still extended up the leg, notwithstanding all their efforts, and by the time I arrived it had reached the inguinal region. The epidermis was loosened on the part affected, below the knee, and was filled with a yellowish fiuid; the upper part of the leg was hot and very painful; there was some fever present, but not as much as I expected to find, considering the extent of surface involved, but the parents informed me that the child was more restless and the fever much higher during the latter part of the previous day. The pulse was small and frequent; the tongue was not coated, but was of a bluish color, with the exception of the tip and edges, which were dark red; the bowels were slightly constipated, but regular; urine scanty and high colored.

The treatment which was employed in this case, with satisfactory results, was as follows: For the febrile, when present, tinc. aconite, gtts. 10; tinc. veratrum, gtts. 5; tinc. gelsemium, gtts. 15; water, 4 ℥—teaspoonful every hour; muriate tinc. ferri being indicated, it was administered in 5 to 10 gtts. doses every

three hours; quinine in 2-grain doses every three hours during the morning decline of temperature. As local applications, tinc. veratrum, 3 3; water, 6 ℥—applied to parts by means of cloths saturated in same, which was changed every four hours to decoction of quercus rub, applied in same manner.

On the morning of the 12th large white spots were present over the entire part affected; no fever or pain present, patient allowing the leg to be handled with impunity. This treatment was persevered in, omitting fever mixture. The redness and swelling gradually disappeared until on the eighth day after the first appearance of the disease the child is apparently as well as ever.

This may have possibly been rhus poisoning, but the parents claim that the child was not at any time exposed to its influence; but if it was I would not desire better results than I obtained from the remedial measures employed in the case.

ALBUMINURIA; ITS RELATION TO UNIMPAIRED ASSIMILATION.

When a patient complains of some dyspeptic symptoms and at the same time passes increased quantities of urine, and this loaded with urates, we have reason to suspect approaching kidney disease.

Albumen, at first in small quantities and appearing six or seven hours after a meal of nitrogenized food, may be looked upon with suspicion, especially when any symptoms that may be referred to impaired digestion are present. We have frequently noticed, that dyspeptic symptoms, that is, a sense of fullness in the stomach accompanied by discomfort in the abdomen, eructations, some cardialgia, etc., and then followed in a few hours by an increased flow of urine, after a meal, albumen in some quantity is almost sure to be found in the urine, and when albumen is present in even very small quantities after a hearty meal and the dyspeptic symptoms complained of, the case is certainly of a grave nature requiring prompt attention.

Albuminuria is a slowly progressing disease, in the main having its starting point from some impairment of digestion and assimilation. It occurs mostly in cities and among heavy feeders of proteid food, but particularly in persons who are addicted to the use of spirituous and malt liquors beyond a certain limit for each case. We must take into note the effect of alcoholic in-

gesta on the state of the urine. One of the first impressions is made on the vaso-motors of the splanchinic vascular areas, increasing the flow of blood through the spleen and kidneys, and at the same time causing vaso-motor tension of other vascular areas, by which blood pressure is increased and the systolic force of the ventricles augmented.

On the other hand, it has been shown that increased ingestion of rich proteid food, by weakening the nervous function of the stomach, duodenum and pancreas, and in many ways not fully known, impressing the function of the liver, large quantities of urea is thrown into the blood. The presence of urea in the blood may justly be regarded as an irritant to the secreting epithelium of the kidneys and also of the cardiac ganglia. In quantities larger than the normal, urea is a powerful irritant to the secreting epithelium of the kidneys; hence we account for the increased flow of urine in some cases of dyspepsia and in the forming stage of Bright's disease. It is well known that impaired stomach and intestinal digestion are sure to be followed by a large production of leucin and tryosin, and these on reaching the liver are converted into urea, which must be excreted by the kidneys. It has been shown also that the liver exercises some peculiarly important influence on the peptones that are conveyed to it by the portal blood.

The transformations which the hepatic cells cause or bring about in the peptones, converts them into albuminoidal material of such a nature that fits them to be physologically suited to tissue assimilation, whereas, the peptones, if untransformed by the liver cells, would act as gross irritant poisons on the system producing serious toxic symptoms, which terminate only after the poison has been expelled by the kidneys as albumen, etc., in the urine.

Taking into account the fact above stated, which we have frequently heretofore presented in these pages in various ways, we can readily account for the dyspeptic symptoms that so frequently accompany Bright's disease. Everything depends on the kind of blood the stomach, duodenum, spleen, pancreas, etc. sends to the liver. Such cases complain of weak back, lumbago, palpitation, impaired digestion, urine of variable color and increased in quantity, congestions of the liver loud; systolic murmurs are heard over the aortic valve and the ventricular systole is strong. Now, we may with a degree of certainty analyze the

symptoms. In the first place, there is no doubt that the increase of urea in the blood is also accompanied by some peculiar additional change in that fluid by reason of toxic material entering it from the liver; that is, this organ has not fully purified the portal blood and removed from it principles of a toxic nature to be excreted with the bile and its acids. Then toxic principles circulating in the tissues exert them to increased activity, and none suffer as much as the secreting epithelium of glands and the secreto-motory nerves as well as the vaso-motors. The systolic sound of the heart, as is well known, in the early stage of Bright's disease, is louder than normal. This is clearly due to a state of excitement of the cardiac ganglia which stimulate the heart muscle to exalted energetic action.

As a matter of course, the presence of urea in the blood in augmented quantity naturally causes an increased invitation of blood to the kidneys, this is easily seen to be alluded with vaso-motor dilitation of the renal capillaries, at the same time the increased systolic energy sends a larger quantity of blood to the kidneys. Now, the blood being loaded with urea and also the peculiar toxic principle from the liver before attended to, the real epithelium become over-taxed, and as a consequence the nutrient arteries of the organ are largely dilated under the increased pressure of labor and the vaso-motors are correspondingly exhausted in their functional life. At this point comes the leaking of albumen through the renal capillaries into the uriniferous tubes along with the water of the urine.

[TO BE CONTINUED.]

FUNDAMENTAL PRINCIPLES OF MEDICAL PROGRESS—VASO-MOTOR THERAPEUTICS.

Several months ago we called attention to the vaso-motor properties of several remedies that are regarded by some therapeutists as antiseptics.

Baptisia tinct. is frequently prescribed in low typhoid conditions with very excellent results which have been mistaken for antiseptic, when, the fact is, the vaso-motor stimulant properties of the remedy accomplished the good. Nearly all remedial agents have some vaso-motor action: some as stimulants, others as depressors.

Among the most valued vaso-motor remedies is *varatrum viride*,

which slows the heart, strengthens the systole and energizes the capillary circulation. Veratrum vir. in our opinion acts on the vaso-motor centres primarily and not on the vagus endings. Small doses will slow the heart, that is, lengthen the diastole. Stimulation of the vagus will do the same when the stimulus is not too strong so as to arrest. Stimulation of the cervical part of the cord near the origin of the spinal accessory will slow the heart in the same way, and any mild stimulus applied to the upper part of the lateral columns of the cord will do the same. When the vaso-motors are stimulated the systole is strong, the disastole lengthened, the lumen of the arterioles is diminished and the course of the blood through them and the capillaries is increased in activity; all of them in turn increase the pressure in the veins so that the blood reaches the right heart more rapidly and the circulation in the lungs is correspondingly energized. Hence, we find that veratrum vir. is one of our most reliable remedies in the treatment of all diseases attended with congestion. In stenic pneumonia and the opening stage of fevers, it is valuable.

Aconite slows the heart by stimulating the vagus; it also paralyses the ganglia of the heart. In asthnic diseases verat. vir. is usually rejected for aconite—an error in our judgment. Aconite kills fever by diminishing the activity of the protoplasmic elements of the tissues; hence, it is a muscle poison. Verat. vir. kills fever by diminishing the blood supply to the tissues and at the same time causes the blood to move more energetically in the capillaries. Between the two we have powerful agents for controlling fevers, but from two different standpoints physiologically.

Minute doses of *ipecac* causes vaso-motor stimulation. Perhaps we may say that ipecac, in small doses, energizes the capillaries of the mucous membranes and the nerve centres. We have repeatedly seen congestive headache relieved by ipecac. Excitement of mucous membranes that are accompanied by vaso-motor paresis of the splanchnic nerves which control the abdominal circulation, and ipecac seems eminently adapted to bring about the opposite of this state.

In those states of the system attended by paresis (and we have this condition in low form of fevers as typhoid, septæmia, asthenic, pneumonia and the like) vaso-motor simulants are needed. A year or so ago we saw a case of puerperal septæmia with all the worst symptoms prominently presented. At a juncture where

the case seemed desperate and near hopeless, baptisia tinct. in 3 gtt. doses every hour was ordered. After twenty-four hours the whole phase of the case was changed. The most striking feature that accompanied the change was a decided increase of blood pressure. When the pulse began to firm the delirium, sordes, dry harsh skin, offensive breath, tympanites, restlessness, all commenced to fade away, the symptoms of septæmia, in fact, changed; hence, we wrote down the action of baptisia, "*vaso-motor stimulant.*"

Hydrastis is a vaso-motor stimulant, because it promotes the activity of the circulation of mucous membranes. We recall the fact that the vaso-motors are anatomically connected with the cord. The gray substance, the true motor tract, in which ganglia cells are found, is practically a vaso-motor centre, and as we follow up the lateral columns to pyramids, thence to the medulla, thence to the gray matter of the hemispheres, we find in the range the course of function, the ruts of vaso-motor centres. Extensive, truly, is this tract, and vast is the function, for the paths traversed by the vaso-motors is wide and long.

Strychnine contracts the arterioles and excites the gray substance of the cord. The reflex functions are largely exercised by strychnine. In small doses strychnine gently stimulates the ganglia cells of the centres, and promotes vaso-motor activity. The capillary circulation is quickened through energy imparted to the arterioles. Strychnine is, therefore, a stimulant to the vaso motors. The more active the capillary circulation is the more highly nourished are the anatomical elements and the more perfect is the removal of the worn and effete material. Vaso-motor simulants promote these phases in the process of life and in this way energizes the organs and promote functions.

In low or adynamic states of the system an unbalanced state of the circulation obtains and this is owing as much to enfeeblement of the arterioles and capillary congestion or sluggishness in large vascular areas. For instance, we know that the liver can contain one-fourth of the blood. The splanchnic vascular areas may and often do contain colossal quantities of slowly moving blood, while other parts contain less than the normal quantity. When blood feebly circulates in such vast vascular areas there must be continued poisoning of tissues by this, so to speak, stale blood. Low nutrition must prevail and the tissues must be also loaded with effete material that should be removed

and washed away by the blood and carried to the proper emunctories to be expulsed. Guided by these facts we learn the therapeutic value of many remedies. Some diuretics, as the acetate and citrate of potash and ammonia, provoke excitement of the renal epithelium by which the nitrogen waste of the system are removed through the glomemli of the kidneys. The condition of the kidneys is made hyperæmic to a greater degree than usual; that is, vaso-dilator influences are brought to bear on the reneal arteries and their minute ramifications and the malpighian tufts and their epithelium are made more active so that vast quantities of blood press through the kidneys, the epithelium of the tufts then pick out the urea and other nitrogen wastes that are in the blood. Reflex vaso-motor excitements work through the spinal nerves on vascular areas. When a vaso-motor dilation is provoked, as in the renal vessels under the stimulus of certain diuretics, there must be a vaso-motor constriction to a corresponding or greater extent set up in remote vascular areas. This is a law of reflex vaso-motor action and is constantly at work in the system and through which the various functions of life are carried on.

The reflex vaso-motor functions as they are expressed by vaso-dilator and vaso-constrictor impulses, both occurring, one as the complement of the other, in varied and distant vascular areas, are actively brought out under the influence of vaso-motor remedies.

In pneumonia, for instance, there is a vast area suffering a vaso-motor paresis and massive quantities of blood have been accumulated in and around the inflamed teritories. An unbalanced state of the vaso-motor system and function has undoubtedly prevailed and corresponding vaso-motor constriction has been set up in other vascular areas, the splanchnic, perhaps. Now, if we administer a remedy like verat. vir. that will equalize the vaso motor function and restore the balance of the circulation, we set in motion the process of cure. Under the influence of verat. vir., the diastole of the heart is lengthened, the vaso-motor constriction in the splanchnic vascular areas is modified so as to admit more blood and thus sluice off the immense accumulation of blood in the parenchyma of the lung tissue into the planchnic and other vascular areas, and in this way the process of cure progresses, other things being equal.

We know that all inflammations are preceded by a state of ex-

citement of the vascular and nervous elements of the tissues involved, soon is set up dilation of the vessels and a colossal accumulation of blood globules, white and red. Stimulation of the vaso-motor nerve of the part will contract the vessels and express the blood out so that the hyperæmia becomes anæmia until the undue excitement passes off. We find vaso-motor remedies will do the same.

Ergot is a vasomotor stimulant.

SYRUP OF THE HYPOPHOSPHITES.

BY W. C. FISHER, M. D., BOLTON, GA.

The old saw, "Where there is so much smoke there must be some fire," is applicable to the popularity of the syrup of the hypophosphites with physicians.

I was led to use these preparations from hearing a lecture by Professor Adolphus on "Restorative Medicine," when I was a student in the Winter of 1879.

The value of the hypophosphites as builders, in many forms of chronic diseases, is undoubted. There are half dozen or more of this preparation. James I. Fellows, I believe, was the first to place successfully an acceptable article on the market. Since then there have been many imitators.

I have found only one objection to the use of this valuable compound in the proper class of cases—its extravagant price, which, perhaps, is unavoidable, seeing the expense of the components and the skill needed to prepare a good article, and, last not least, the expense attending such colossal advertising as the energetic Fellows has adopted.

Now, I say that it is not difficult to make a good syrup of hypophosphites, if you understand some of the elementary principles and manipulations of pharmacy. I have studied this matter of making the compound hypophosphites—have read everything on the subject that has come in my way for the last few years—have conversed with expert pharmacists, and have experimented somewhat on my own account, to learn and determine the best and easiest methods of procedure. In the first place, I have long since found two essentials to success; the first is, the hypophosphite of iron must be prepared on the spot to be of any service in the making of a good and permanent solution. To make the hypophosphite of iron I proceed as follows—nor do I claim orig

inality in anything that follows: Dissolve 188 grains of the hypophosphite of lime in about 6 fluid ounces of hot water; let the solution cool, then add, in small quantities at a time, the solution of chloride of iron (such as the tincture is made of), these form a dense precipitate of hypophosphite of iron. When all the hypophosphite of lime has found its full combination with the iron no more will form. The next step is to wash the precipitate, and that is done by pouring it on a flannel filter and gently pour on distilled water enough to wash out the chloride of lime in solution. This process will give about 150 grains of hypophosphite of iron.

The best menstruum for dissolving the hypophosphite of iron is a recent preparation of citrate of potassium, made by neutralizing carbonate of potash with citric acid. I generally use about one-half ounce of the carbonate dissolved in about four ounces of water, and powdered citric acid carefully added in small quantities until the solution is neutral, which is determined by the use of litmus paper, which is not discolored by a neutral solution, but is turned red by one that is acid. It is necessary to know that the solution is not alkaline, which is determined by using a slightly reddened litmus paper as a test. When the hypophosphite of iron is added to this solution of citrate of potassium solution is readily effected, aided, if need be, by gentle heat. This solution of the hypophosphite of iron seldom, if ever, throws down a precipitate. Professor Adolphus remarked in his lecture alluded to, that iron combined with ammonia was more efficient as a tonic than when not so combined. Taking the hint—and subsequent experience has given me reason to accept it as therapeutically true—I have, in many instances, made a solution of citrate of ammonia for dissolving the hypophosphite of iron, which I make by dissolving half an ounce of carbonate of ammonia in six ounces of water and neutralizing the solution by adding powdered citric acid, proceeding in the way already explained for potash.

To make the hypophosphite of quinine, I proceed as follows: Rub up 150 grains of sulphate of quinine in 6 fluid ounces of strong alcohol; then dissolve 39 grains of hypophosphite of lime in hot water, ʒvi; mix the two fluids and violently shake them for a few minutes, then set it aside for an hour, occasionally shaking; then throw the whole on a paper filter. After all the fluid has passed through, wash the magma (which is nothing but sulphate of lime) with two or three ounces of strong alcohol, rec-

ollecting that the hypophospite of quinine is dissolved in the alcoholic solution that has passed through the filter. This gives us 150 grains of hypophospite of quinine. If strichnine is desired in the compound, you only need to add a grain or two of the alkaloid *strychnia* to the strong alcohol in which it will dissolve, if pure. The next step is to dissolve hypophosphite of lime, 270 grains; hypophosphite of soda, 180 grains, in 7 ounces of water; then add 17 ounces of good white sugar, and aid solution by gentle heat; then add the solution of hypophosphite of iron and the alcoholic solution of hypophosphite of quinine and strychnine, and bring the whole, if necessary, up to 20 fluid ounces by adding syrup. The dose is one teaspoonful three times a day. It is neutral; seldom, if ever, throws down a sediment, and is fully as good as any man's make in every essential particular, and cheaper by half than any of the proprietary preparations of the kind.

THE ARKANSAS ECLECTIC MEDICAL ASSOCIATION

met in convention in the parlors of the Glidewell Hotel, Little Rock, on May 18, 1886. The President, Dr. J. W. Pruitt, called the meeting to order. In attendance were Dr. J. W. Pruitt, President; Dr. J. W. Warren, Vice-President; Dr. R. H. Gardner, Treasurer; Drs. M. F. Dumas and Jacob Grade, Censors; Dr. Wyatt Slaughter, Secretary, and Dr. J. M. Park, Corresponding Secretary.

On motion of Dr. Dumas, all liberal physicians of the city were invited to attend.

After transacting the business of the day the Association adjourned to meet at 9 a. m., next day.

President Pruitt delivered an able annual address, from which we make a few extracts:

"American Eclecticism, actuated by that glorious spirit of liberty and independence, that characterized our revolutionary forefathers, refuses to submit to the dicta of any clique, or code, not in accord with the amenities of life practiced by gentlemen. It is not sectarian nor one-ideaed, but broad and free, and as liberal as true science itself.

"Eclecticism asks nothing but an open field and a fair fight; give her that and panoplied with truth and success, as she always has been, her cause can never fail—the cause of truth, freedom and right.

"When people get sick now-a-days they generally send for the doctor, and the one they send for is the one they think will cure them the quickest, regardless of schools, pathies or creeds, and the successful physician is a hard man to beat. You cannot 'down him' by any fair means. And as Eclectic physicians have, as a clsas, always been eminently successful in the cure of disease, they have always, where known, stood high in the estimation of the public.

"In regard to medical legislation we can but reiterate the sentiments expressed last year. A law requiring all physicians to be graduates of reputable schools of medicine, chartered by the States where they exist; that's enough. While at the same time we are uncompromisingly opposed to any law creating boards of health having judicial powers, especially when the execution of it is placed in the hands of any school of medicine. Such a law, so executed, is sure to become an engine of tyranny and oppression, and is inimical to the spirit of American independence and freedom."

Dr. Dumas reported several interesting cases, which were discussed by the Association. Dr. Slaughter reported an interesting case of rheumatic neuralgia and its treatment. Dr. Grade reported his treatment of whooping cough, which he claimed had given satisfactory results. The Association then adjourned till 2 p. m.

Dr. Dumas read an able paper on "Conservatism in Medicine." D. Pruitt read a paper on the treatment of "Chronic Nasal Catarrh," which was well received.

The officers elected for the ensuing year are, Dr. E. H. Stevenson, President; Dr. Jacob Grade, First Vice-President; Dr. D. J. Warren, Second Vice-President; Dr. F. M. Dumas, Corresponding Secretary; Dr. J. M. Park, Recording Secretary; Dr. R. H. Gardner, Treasurer.

On motion of Dr. Dumas, the time and place of meeting is the third Wednesday in May, 1887, in the city of Little Rock, Arkansas.

Editor Courier-Record Medicine, Fort Worth, Texas:

In your journal of December, 1885, we see a circular letter from Alex. W. Acheson, of Denison, Texas, calling for all possible evidence against irregular doctors. "Mistakes, blunders and mal-practice, either ludicrous, serious or fatal are especially

asked for." "Anything showing incompetency, etc., will be gratefully received." "Names, dates or localities not of so much importance as facts, and might be omitted."

This circular letter of Dr. Acheson met your approval and favorable comment. Knowing your standard of regularity to consist alone in an adherence to the code of ethics of the American Medical Association and its subordinate organizations, and that you regard neither literary qualifications, professional attainments, or standing in the community to have any weight with you, therefore we are of that class of physicians who come under the ban of your displeasure, and it is against us and others who have the misfortune to belong to some other organization that the bid is made to the irresponsible slanderer to stab our professional characters behind our backs and in the dark. We protest that this smacks more of the intolerance, ostracism and bigotry of the dark ages than it does of the light, liberty, liberality and toleration of the latter half of the nineteenth century. Can it be possible that any considerable portion of what claims to be a hightoned and honorable body of physicians, will aid, abet or by silence give their consent to so degrading an assault on the character and standing of their contemporaries, who differ with them in opinion? God forbid!

Is it a war to the knife, and the knife to the hilt, which you propose to wage against all those who may be so unfortunate as to disagree with you? Then, let it be honorable, manly warfare. Come out of your proposed lurking places and midnight ambush and marshal your hosts in the dazzling light of the noonday sun. Bring out your "facts" supported by names, dates and places, like chivalrous soldiers, and we are ready for the fray. We have neither sought, nor will we evade, an honorable contest. We loath and abhor a dishonorable struggle for supremacy and we will not degrade ourselves so low as to resort to the measures suggested in the above named circular in self-defense, but will with the utmost confidence appeal to the justice, the intelligence and patriotism of our legislators and an enlightened public opinion, to maintain our natural and constitutional right to practice medicine on rational principles, remain unimpaired by legal restrictions, except those which relate to mal-practice and bear with equal force upon all classes of physicians. We ask why is it necessary to establish a State medicine more than a State religion? We believe that few persons would have the

effrontery to say that religious toleration did not tend to the spiritual elevation and moral purity of the church; and as it is in religion, so it is in medicine, the different schools stimulate each other to greater efforts for the development of the science and a higher standard of qualifications for their graduates. Let us relegate to the dead past everything that has an inkling of star chambers and inquisitorial courts as unworthy of the age in which we live, and engage in a generous rivalry as to who can most successfully relieve the ailments of suffering humanity and ward off the icy darts of the grim monster, Death.

This is in the strictest spirit of our ethics. What is the spirit of yours? We are not afraid of a generous rivalry. Why are you?

Now, in conclusion, we do hope that upon cool reflection and mature deliberation, that you will see the error into which you have fallen upon the impulse of the moment and that better counsels will prevail—counsels more in harmony with the age in which we live. J. N. ADKINS, M. D., President Tex. E. M. A.
J. E. A. BALL, Corresponding Secretary.
M. W. HENRY, M. D., Corresponding Sec.

NOTE.—The foregoing communication has sought publicity through the GA. EC. MEDICAL JOURNAL on the ground that the authors mailed it to the Courier Record of Medicine, Fort Worth, Texas, but it was returned to the post-office from whence it was mailed. EDITOR GA. EC. MED. JOURNAL.

THE HARDSHIPS AND DIFFICULTIES OF A DOCTOR.

When all professions we contrast,
The doctor has the hardest task,
For go he must both day and night,
Be the weather cold, dark, or bright.
All look to him to give relief,
From the peasant to the chief.
When called upon he has to go,
Whether sunshine, rain, or snow.
Himself of comfort oft denies
The sick to furnish with supplies;
And thus he travels day and night
To put his patients in good plight.
But if the case cannot be reached
He, of his skill, is then impeached:

It matters not how hard he tried
To save the sick, but still he died.
Who would envy his position
For the title of Physician?
But all this he must forego,
Whether he gets his pay or no!
But we find among the masses
Doctors of different classes:
The Allopathic, on his part,
Claims to be Master of the Art,
Though many do not like him well
Because he uses calomel.
The Botanic puts in his claim;
Some look on him with disdain,
Yet, in despite of all that 's said,
He claims he 's right and goes ahead.
Here comes another with his steam,
And makes the sweat almost stream!
The Hydropath is quite bold,
And says to use the water cold.
Next the Eclectic comes along
And tells the people they 're all wrong,
And says so them: "I combine,
And all that 's good include in mine!"
The Homœpath declares his skill
Lies in his little sugar pill!
After a while, here comes the Quack
And says he knows just what they lack.
So, some conclude they 'll let him try,
For if they don't they 'll surely die!
While treating them, he puffs and blows,
But what he gives, nobody knows;
And if, perchance, they should get well
The wonders he has done, he 'll tell!
So, the people become confused,
And think the Practice much abused.
When they get sick, what shall they do—
Send for a doctor, or tough it through?
He treats diseases of all kinds,
And has to deal with many minds.
No doubt the wife doth often grieve

Because the doctor has to leave,
And she, no doubt, has many fears
That exposure will end his years;
But still she strives to do her part
With willing hands and cheerful heart.
It 's all a Humbug, some cry out,
While others hesitate and doubt;
The credulous say them he 'll try---
So he will venture, live or die.

Yours, Dr. E. C. ROTHROCK,
Known as the "Texas Swamp Doctor."

EDITORIAL

CORRECTION.—In June number, page 137, sixth line from bottom, is an error to be corrected. For "10 grains" podophillin, read *1-10th grain.* In July number, page 177, in Dr. King's pager on Piles, third line, read *causes* for "cancer."

TENNESSEE ECLECTIC MEDICAL SOCIETY.

This Society adjourned to meet in February, 1887. A committee, appointed for the purpose, will fix the date and place. Every Eclectic and liberal physician in the State will receive notice thirty days before the time of meeting.

W. H. HALBERT, Secretary.

WE congratulate the Eclectics of Tennessee. Onward the star of Electic Progress wends its way to Conquest and Empire! —EDITOR.

FOR MUSCULAR RHEUMATISM.—Biggers prescribes: ℞. Tincture Asclepias tuberosa; tinct. macrotys, aa ʒ iss; glycerine, ʒ i. M. Sig. Teaspoonful every two or three hours. This is an old prescription of his, and has done good work.

For post partum hemorrhage—the kind of flooding that pours out of women sometimes in torrents—Biggers says: Give powdered capsicum liberally. Don't be afraid of it. You will find capsicum the only remedy that can arrest such kind of flooding, which, if continued five minutes, must surely kill. In a recent case of the kind, in which the blood poured out as if escaping from the cut carotid, he saved the life by giving a teaspoonful of

capsicum in a little water. This, we acknowledge, is heroic treatment, but it was needed and did the work. Other old Eclectics have had similar experience. These old men are not old fogies by any means; but what time and experience have proven to be valuable no amount of blandishment and coqueting can pale into insignificance. Capsicum is the purest stimulant in the materia medica. Truth never loses by age or experience. Stick a pin here.

HOW TO PASS AN OTHERWISE IMPASSIBLE STRICTURE is accomplished in the following way by Dr. W. P. King, of Sedalia, Mo.: The method consists in passing a small catheter into the urethra down to the seat of stricture, or obstruction, until it will go no farther; then fix the nozzle of a suitable syringe, filled with water, to that end of the catheter which is outside the penis, and, after sufficiently compressing the head of the penis with the thumb and finger to prevent regurgitation of the fluid, inject the water into the urethra. This injection will sufficiently dilate the stricture to allow the catheter, with slight pressure, to pass through into the bladder. In the want of a syringe, the mouth may be filled with water aud similarly squirted through the catheter with the same effect. After the catheter has thus made its way into the bladder it may be withdrawn and a proper size catheter or sound adevulsifier immediately introduced.

There is nothing new about this so far as the principle is concerned. Years ago we had seen used by others and used by ourself, forcing a syringeful of sweet oil with a catheter to make it slip through a stricture or other embarrassment in the urethra. Several years ago we saw a statement in a medical journal of a method of a doctor out West who attached three or four feet of rubber tubing to the outer end of a catheter that had been introduced into a urethra impassably (as the word goes) strictured; at the other end of the tube he attached a vessel of water, elevated as high as the tube was long, so by hydrostatic pressure the urethra and stricture were dilated and the catheter gently pushed through the stricture into the bladder. In 1879 we passed a stricture and entered the bladder of a negro in this way before our class. The contrivance used in performing this operation was, simply, as follows: A large glass lamp-chimney had its lower apertere fitted with a cork; the cork was pierced in the center, and a piece of ordinary glass tubing, about two inches in length,

was passed through the hole in the cork; one end of a piece of rubber tubing, four feet long, with a calibre one-fourth of an inch, was passed over the end of the glass tube outside the chimney, the other end was attached to a No. 7 English rubber catheter; the catheter was introduced into the urethra as far down as the stricture, then warm water was poured into the chimney, which was elevated as high as the rubber tube would allow; the head o the penis was gently pressed up ward and backward, and in two minutes the catheter entered the stricture and was forced through it into the bladder.

During the course of events in life things and ideas travel in circles.

THE COLLEGE.

We have received more than double the usual number of letters and cards this summer, calling for announcements, than in previous year. More letters of inquiry relating to the course of instruction, asking for information regarding expenses and many other points, than in any previous year. Prof. Goss says he has received a larger number of letters and postals relating to the same subject, this summer, than in previous years. We can, without hazarding anything, say the class will be at last one-third, perhaps fully a half, larger than any previous one. We can also say there will be a good representation of Northern students with us this winter. We will have students from more States than ever came to us before in one session. Putting all these things together, the friends of the College have great cause to be proud and pleased. Eclecticism is on the onward march to conquest and empire.

BOUVENINE, BUSH'S FLUID FOOD, containing 26.58 per cent. of soluble albuminoids. Read the high professional commendations of this valuable nutrient. In these days when we are seeking more for food that debilitated patients can appropriate at once without drawing heavily on the exhausted vital energies than for medicines, such valuable food preparations as this deserves to attract the practical man's attention.

Murray's Charcoal Tablets afford physicians a pure vegetable charcoal of exactly the kind of best use to him. Read the ad.

Ditman's Sea Salt gives you just what you need for healthful baths and irrigations for diseased mucous membranes.

CHLORODYNE made by the following formula we think very good, and keeps well for a long time. We have frequently made this compound; have had it in use for more than twenty years, and therefore speak by the book:

Heat pure New Orleans molasses in water bath, and remove the scum as it rises, until it becomes clear.

1. Mix one part of officinal mucilage of gum acacia with two parts of the clarified molasses. This is the base fluid.

2. Dissolve 8 grains of sulphate of morphia in half a drachm of distilled water, if needed to assist solution by gentle heat; then add 8 grains of powdered purified extract of licorice; aid solution by gentle heat in the water bath, so that the morphine and licorice are entirely dissolved in the water; and when cool add 1 fl. drachm of Squibb's sulphuric ether; then set aside for a few minutes, and proceed as follows:

3. Take a portion of the base-fluid and add 3 fluidrachms of purified chloroform. Shake well this mixture, then add an additional quantity of the base to make ℥i; shake well again. Then add No. 2 to No. 3; shake well. Dose, from 10 to 30 drops.

Twenty drops contains one-fourth grain of morphia, two and a half minims of chloroform, and half the quantity of ether.

If you desire it, you may add 2 fluidrachms of a reliable fluid extract of cannabis indica, but this is hard to get.

EUPATORIUM PURPUREUM is a valuable diuretic and a vasomotor stimulant. In Bright's disease it is of considerable value, because, while it promotes increased diuresis, it does not irritate the secreting epithelium of the convoluted tubules. It does, in a remarkable manner, relieve the congestion of the kidneys by lessening the amount of albumen in the urine; pain in the small of the back is relieved, and the quantity of urea eliminated notably diminished. In ordinary congestion of the kidneys attended with pain in the back, diminished secretion of the water of the urine, increased pigmentation of that fluid, and high specific gravity, this medicament is deserving of extensive use, for we think it will be found a very valuable diuretic, and at the same time a sedative to the irritated secreting part of the organ. Among its other good properties is that it tones the heart while it relieves high blood-pressure and softens the hard pulse. Queen of the Meadow is also a valuable medicament in uterine and ovarian congestions.

HERNIA in male children should lead us to suspect phimosis or adhered prepuse to glans, therefore search for some wrong in the glans penis. Often we find a mere pinhole in the prepuce or a very short frænum. All these troubles may cause hernia in male infants. The cure of the former can be only effected by proper surgical operations for the relief of the latter. If the prepuce is too long, remove the redundant part. If the mucous surfaces of the prepuce and glans are adhered, separate them with the probe or spoon. If there is only a pinhole in the prepuce, this latter should be slit in two places, and the mucous surfaces kept separated by inserting cotton-wool or lint soaked in carbolic oil, 1 to 20, being sure to make the carbolic oil by dissolving carbolic acid in crystals in it.

PILLS OF THE IODIDE OF IRON.—℞. Purified iodine, grs. 40; reduced iron, grs. 10; pulverized g. a., grs. 10; powdered white sugar, grs. 20; glycerine, drops 15. Triturate the iodine and iron (dry) together in a mortar until reduced to fine powder and all smell of iodine ceases to arise and the powder assumes a greenish cast; then add the others, and make into pills, using p. licorice root, if needed, to give consistence. Make into fifty pills; when dry, coat them with an ethereal solution (strong) of balsam of tolu. We have used these pills many years, and know their value.

WEAK currents of galvanism applied—the negative pole to the painful spot and the positive over the nape of the neck—affords nearly unfailing relief in neuralgia. Small galvanic batteries are of inestimable use in the treatment of this frequent form of ailments.

A GOOD STYPTIC.—Collodion, 100 parts; acid carbolic, 10 parts; tannin, 5 parts; benzoic acid, 5 parts. Shake the bottle well, to insure the complete solution of all the drugs. This is an excellent protection to abraded parts and to coming boils.

THE NATIONAL was a magnificent success viewed from every standpoint, and the South is proud of it, and will do and keep doing more and more to help the National ascend higher and higher in fame and grand achievements. Two hundred new members were added to the roll! This is worth noting, and a right hearty congratulation.

MENTHOL IN PRURITUS AND URTICARIA.—Solutions of 2 to 10 grains to the ounce of water is said to cure these very troublesome affections, when applied to the affected parts.

BORIC ACID, ʒ iij; biborate of soda, ʒ viii; glycerine, ℥i. M. Ten to twenty drops, or even teaspoonful, at a dose constitute a valuable remedy in cystitis. Add the whole to a pint of water, and you have the best antiseptic any reasonable man should have use for as external application in wounds, etc.

BOOK NOTICES.

The Physician's Leisure Library. Mr. George S. Davis, of Detroit, Mich., is issuing a series of twelve new valuable medical books by eminent authors, each complete in itself, and at the trifling cost of 25 cents each, or $2.50 for the series. Seven of the series have come to hand: Vol. 1, in two parts, New Medicaton, by Du Jardin Beaumetz, M.D., translated by E. P. Hurd, M.D. These are richly worth $1. Vol. 2, Inhalers, Inhalations and Inhalants, by Beverly Robinson, M.D. This is a guide to treatment of common catarrhal diseases of the respiratory tract; illustrated. Vol. 3, The classification and treatment of Ear diseases, by Samuel Sexton, M.D.; illustrated. Vol. 4, The use of Electricity in the removal of superfluous hair, and in the treatment of various facial blemishes, by George Henry Fox, M. D. Vol. 5, Spinal Irritation, by William H. Hammond, M. D., in which the author gives a succinct history of the literature, pathology, prognosis, diagnosis, and very perspicuous course of treatment. Vol. 6, Modern treatment of Eczema by H. G. Piffard, A.M., M.D., which will be found full of helpful suggestions and formulæ. Vol. 7, Antiseptic Midwifery, by Prof. Henry G. Garrigner, M. D. Vol. 8, The determination of the necessity of wearing glasses, by D. B. St. John Roosa, M. D. Vol. 9, The Physiological, Pathological and Therapeutic effect of Compressed Air, by Andrew H. Smith, M.D. Vol. 10, Granulated lids and contageous Ophthalmia, by W. F. Meltendorf, M. D. Vol. 11, Practical Bacteriology, by Thomas E. Satterthwaite, M.D. Vol. 12, Pregnancy, Parturition and Puerperal states, and their Complications, by Paul F. Munde, M.D. Write to the publisher for a complete descriptive circular.

Medical and Surgical Directory of the United States, comprising list of physicians and surgeons, arranged by States and school of

practice, post-office address, population, and location, date and college of graduation; all the existing and extinct colleges in the United States and Canada, with locations, officers, number of professors, lecturers, demonstrators, etc.; with an immense amount of other and valuable information useful to the medical profession, a list of which would occupy too much of our space; besides these, there is a list of 80,000 physicians in the United States, alphabetically arranged, and with proper references for convenient consultation in the body of the work. This valuable Medical Directory of the United States is published by R. L. Polk & Co., Detroit, Mich, and sold at the reasonable price of $7. We have given the book careful examination. It appears superior in point of accuracy to anything of the kind heretofore put out by any publisher or compiler in this line of work. The magnitude of the work performed may be imagined from the number of pages (1,455) it contains, and the 80,000 doctors in the United States, whose addresses, school of practice, college and date of graduation—when these latter could be obtained—are given. "R" tells you the man who owns the name is an Allopath or so called "regular;" "H" means Homœpath, and "Ecl." means Eclectic.

Galabin's Midwifery. By Alfred Lewis Galabin, M.A., M.D., Obstetrical Physician and Lecturer on Widwifery and the Diseases of Women to Guy's Hospital; Examiner in Midwifery to the Conjoint Examining Board for England; F. R. C. P. L. Illustrated with 227 wood engravings. Philadelphia: P. Blackiston, Son & Co. 1886. The number of text-books on Midwifery are not few, while many are of high merit as aids to the student of Obstetrics. For all this, we think the present work has a place in the range of educational training, and is written with the purpose of presenting the science and art of midwifery in simple and direct language, free of obscurity and tiresome prolixity. The mechanism of labor in the various phases of normal and complicated aspects is well presented and clearly taught—to us a point of merit worthy of note. On all the practical points in the art of assisting the woman and Nature in bringing about successful parturition, in combating adverse conditions, and avoiding dangerous ones, the book is well up to modern views. We are well pleased with it on all the points of practice discussed and enforced in the text. It is printed on good paper, clear type,

and well bound, containing 753 pages, including a full and complete index, which to our mind is of considerable value. Price, $3, cloth; $3.50, sheep.

Practical Clinical Lessons on Syphilis and the Genito-urinary Diseases. By Fessenden N. Otis, M.D., Clinical Professor of Genito-urinary Diseases in the College of Physicians and Surgeons, New York; Surgeon to Charity Hospital, etc. New York and London: G. P. Putnam's Sons. 584 pages; cloth, $2. Printed for the author. 1886. This the author calls the Student's edition, and well he may if, by this title, we are to understand a book written with the special view to afford clear and perspicuous teaching. Having read it, we are ready to recognize the book as our classical work on venerial diseases. We think nothing is hazarded in pronouncing it the best text-book of the kind now presented to medical students, and do most heartily recommend it as being eminently practical as well as learnedly complete in all particulars embraced in the discussions of the varied topics it treats. We know of no book we could so heartily commend to the general practitioner as well as the specialist. If it has any fault at all, it is on the score of simplicity and absence of obscurity. We say, buy it.

The Disorders of Menstruation; a practical treatise. By John N. Upshur, M.D., Professor of Materia Medica, etc. G. P. Putnams's Sons & Co., New York and London. From a practical standpoint this book is of secondary account, the author evidently being unacquainted with the advanced therapeutics of the modern school and therefore runs in the ruts of the old school authorities.

ANTHROPOLOGY, by Daniel Watson, LL. D., author of "Prehistoric Men," etc., with an appendix or Archæology by E. B. Taylor, F. R. S., author of "Primitive Culture." This is one of the Humboldt Library publications. The table of contents will convey an idea of the scientific character of the volume: 1. Scope of the science; 2. Man's place in Nature; 3. Origin of Man: 4. Races of Mankind; 5. Antiquity of Man; 6. Language; 7. Development of Civilization; Archæology. Send 15 cents to the publisher, J. Fitzgerald, 393 Pearl street, New York, for it. We think it is the best popular treatise on the subject we have read, and recommend it because the style is clear and comprehensible to ordinary readers.

CHRONIC STARVATION.—Upon whatever other points they may differ, authorities on dietetics agree that nitrogen is the most essential of all foods, and that a certain amount should be taken regularly. Diminution of the quantity of food, whether from inability to procure it, or a disinclination for it, generally means decrease or absence of nitrogen. That this leads to dire results is a well established fact. Graily Hewitt, in an address on "Chronic Starvation and Delicate Females," before the British Medical Association, said: "For the last ten years or more I have carefully inquired into the history of patients suffering with uterine and ovarian disease, or some affection incidental to childbed, and I have found a continuous insufficiency of food, especially the nitrogenous, to have existed almost universally, so that I have naturally come to regard this chronic starvation as an important factor in disease."

The serious troubles arising from insufficient nourishment are also shown in a marked manner in the case of delicate females during gestation, a large proportion of whom are so enfeebled by the constantly recurring paroxysms of vomiting and the consequent diminution of food assimilation, that when the period of parturition arrives they are so reduced in strength as to be peculiarly susceptible to the attacks of disease incident to childbirth, and the offspring is ushered into the world puny and feeble, and especially liable to a complication of physical evils solely attributable to its starved and anæmic condition.

Colden's Liquid Beef Tonic contains precisely the elements indicated by Dr. Hewitt as being so essential, combined with citrate of iron, cinchona, and simple aromatics, forming at once a palatable nutriment and reliable tonic, and its range of usefulness embraces all cases of debility of whatever origin. It has been in use fifteen years, and those who have used it most are most emphatic in its praise.—*Massachussetts Medical Journal.*

PILES.—I can speak positively of the great value of Kennedy's Extract Pinus Canadensis. I have been treating a case of protruding piles of twenty years standing, making life almost intolerable at times, they have been treated for years only with paliative results, about a year ago an operation was submitted to, since which time the tumors have remained smaller and less sensitive, but a new trouble soon set in, namely, itching to a terrible extent, which nothing seemed to relieve until I tried the ext.

canadensis two parts to one of glycerine, two or three applications of which relieved the itching entirely, and the disease is being rapidly benefitted in every way. Have used it only once a day after each evacuation. I find it an excellent remedy in leucorrhœa also. Yours truly, C. H. DAVIS, M.D.

Funkhannock, Pa., July 30, 1885.

DR. B. F. NICHOLLS, Physician to the Howard Hospital, Philadelphia, Pa., in a recent article on Nervous Diseases, in the Medical Brief, states that, from his experience with celerina, he believes it to be a remedy that will meet the indications of all cases where nervous prostration plays an important part. He has used it in nervous dyspepsia, spermatorrhœa, heart trouble. and many other affections dependent on disordered nerve action or exhaustion of nerve force.

SUMMER DIARRHŒA.—In the large class of summer diarrhœas of children and adults, with griping in the bowels and flatulence, the use of listerine, in doses varying from 10 drops to a teaspoonful (with or without water), has a most salutary and pleasing effect.

It can be administered at short intervals after eating, as soon as regurgitation, distension or acidity occurs. Its action in arresting excessive fermentation is prompt, besides it exercises a decided sedative influence on the mucous membranes of the stomach.

The thymal, menthol, and boracic acid which, with the quota of alcohol necessary to their proper admixture, from the principa elements of listerine, lend to this compound a special value in this class of cases.—*New York Medical Journal.*

BROMIDIA.—I have tried bromidia in two cases, one patient suffering from a slight febrile affection, the other a victim of acute insomnia; in the latter case various preparations of opium had proved useless and the administration of chloral was followed by lassitude and congestion in the head.

Bromidia produced sound sleep in both of these cases, unaccompanied by any unpleasantness on awaking. In my opinion this preparation is destined to render good service, and I intend prescribing it whenever the opportunity presents itself.

MAURICE HACHE, M. D.

8 Rue de Tournon Paris, May 18, 1886.

DR. A. M. CHORD, Logansport, Indiana, says: Peacock's Bromides is a valuable remedy and I can heartily recommend it to the profession where the use of such a preparation is indicated. It takes the place in our list of remedies that has long been needed. It is all that is claimed for it.

DR. A. L. ANDERSON, Rhea Springs, Tenn., I have the pleasure to say that I have used Peacock's Bromides with entire success in vertigo and congestive headache in the case of my wife. It is the best brain and nerve sedative I ever used.

IN the decline of life when exhausted nature habitually repels the restorative influence of sleep, there is nothing so suitable to induce healthful repose as one half to one teaspoonful of bromidia at bedtime. It may be taken for years in the same dose, with the same effect, and without detriment.

SURGIBAL INSTRUMENTS AND APPLIANCES.—Buy all you need in this line of Mr. I. Phillips, Atlanta, Ga., where you will be sure to get the best instruments at rock-bottom prices. Mr. Phillips is a square man. See his advertisement in the JOURNAL.

The September *Century Magazine* is a magnificent number. Buy it by all means.

INTERESTING TO PHYSICIANS.

POSITIVE MEDICATION!—Comprising Alkatrits, Alkametric Granules, Alkadermic Pellets, and Alkassayed Fluids—New forms of medication in which the potent isolated principles (Alkaloids, etc.) of drugs may be prescribed or administered with perfect precision. A thirty-page pamphlet and Samples will be mailed FREE on application.

FREDERICK STEARNS & CO., Manf'g Pharmacists, Detroit, Mich., U. S. A.

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THE
ECLECTIC MEDICAL JOURNAL.

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ORIGINAL COMMUNICATIONS.

ELECTRICITY IN MEDICINE.

PAPER No. 4.

BY G. W. D. PATTERSON, M. D., PHD., ATLANTA, GA.

Electrode is the name given to the conductor attached to the end of the conducting cord, by and through which the electric current is applied to the patient. This conductor may be of any suitable material or shape best adapted to the work desired to be performed, and may be of metal, sponge, carbon, or any other appropriate substance. There is a cord from each pole of the Battery or Electric Machine, and, therefore, the electrodes are distinguished from each other as positive, plus or negative—according to the pole with which it is connected. That connected with the positive pole, being the positive electrode; the other being the negative electrode.

The positive electrode is also called the *anode*, from the Greek word signifying *up*, and is the electrode through which the current passes into the system. The negative electrode is also called the *cathode*, likewise from the Greek, signifying *down*, and is the electrode through which the current passes out of the system.

Electro medical writers mention several currents, as the following:

The Continuous current is that which uninterruptedly flows from, or is generated by the galvanic battery, completing its circuit continuously and without noise. So the terms galvanic current and continuous current are interchangeable.

The Interrupted current is that manifested or developed by the Faradaic battery or electro-magnetic machine.

To explain the mechanism by which this is accomplished would be to describe fully a Faradaic battery, and is beyond the purpose

of these papers; and I refer the ambitious and those desirous to obtain a thorough knowledge of this style of machine to a study of the battery itself, in conjunction with such works as describe the various forms of Faradiac or Induced batteries. I will here say that I deem this information essential to understandingly use the interrupted or induced current; yet the battery can be successfully used, as a machine, without knowing how it is constructed or upon what principles it works.

The Interrupted current flows first through a primary coil of wire, which current is rapidly broken and closed by a rheotome introduced into the circuit. This induces a current in another or secondary coil—the induced current; and without such interruption no such current is induced in the secondary coil. The interruption is necessary to the induction. So the terms, Faradaic current, Interrupted current, Induced current, are interchangeable and but different names to the same current. It being called the Faradaic current from the name of its discoverer, Farady, and Interrupted current because the interruption is necessary to, and a part of, this particular current, and named likewise Induced because of its being transmitted by induction.

The current flowing through the primary or inner coil of a Faradaic machine is the Primary current, and has no inducing physiological effects. This term is sometimes improperly applied to the continuous or Galvanic current.

The Secondary current is the name given to the current supplied by, or from, the outer coil of a Faradaic machine, and is a true Induced current.

The Galvanic current is sometimes interrupted according as it may be necessary to produce certain results, mechanical or othwise, that the Continuous current will not produce. This is termed an Interrupted Galvanic current, to distinguish it from the Faradaic current, which is, of necessity, an Interrupted current.

A current is said to be Constant when particular elements being combined, are immersed in an appropriate exciting fluid, a current is generated by chemical action at once steady and operating with unvarying continuity of strength—at all times reliable and sure. Example, a Bunson cell.

An Inconstant current is when, by combining elements in an active exciting fluid, a violent chemical action is set up, but gradually loses power, and finally ceases all generation of current

over the circuit. This is inconstant, unsteady, unreliable, and uncertain; such are all bi-chromate of potassium batteries. They will run out and cease action; yet for short service are very much employed on account of their great activity when first set in operation.

The currents, then, may be divided, according to quality, as follows:

The Continuous or True Galvanic current.

The Interrupted, Faradaic or Induced current.

The Interrupted Galvanic current.

The Constant or steady current.

The Inconstant or unsteady current.

The Primary current from the inner coil of the Faradaic machine.

The Secondary current from the outer coil of the Faradaic machine.

The currents are designated, again, by their direction and by their mode of application.

The Downward current is a current flowing from a nerve centre or trunk to the periphery or from any organ or portion of the body to the extremities. This is also called a Descending current. Thus, if the anode or positive electrode is placed upon any nerve centre or plexus—say the brachial plexus, and the cathode or negative is held in the hand—this will be a downward or descending current; or, if the anode be upon the medulla and the cathode be at the coccyx, likewise a downward current.

The Upward or ascending current will be the reverse of this; the anode below, and the cathode above.

An Upward and Downward current is when an electrode will be under each foot or held in each hand; ascending on one side, descending on the other.

About the head, so-called Electricians invariably make mistakes, and beginners in the use of the current are liable to err, in applying Downward or Upward current; but bear in mind that downward is from a centre and upward toward a centre, and mistakes will not occur. If the downward current is to be applied about the head or brain, place the anode upon the medulla or nearest to it, the cathode over or on the part to be treated; if the upward current, then the cathode upon the medulla or nearest to it, the anode over the part to be treated. etc. This will be made plainer when we come to consider the different physiological and mechanical action of the electrodes.

The Stabile current is where the electrodes are stationary upon the patient during the application of electricity.

The Labile current is where one or both of the electrodes are moved about over the patient during the application.

The Inward current is that from the anode to the central point of the circuit within the patient.

The Outward current is that from the central point of the circuit within the patient to the cathode; this, as the previous current, applying where cords are of equal length, as they generally are.

The Increasing current is when the quantity, strength or tension of the current is gradually increased by, with, the galvanic battery, adding cell after cell to the circuit, or with the Faradaic battery, withdrawing the cylinder that covers the case, or adding tension.

The Decreasing current is the reverse of this: gradually decreasing the quantity, strength or tension of the current used.

These two classes of currents are used more with the Continuous current than any other, and seem especially applicable to them.

CASE-BOOK.

BY C. D. KIRK, M. D., EUDORA, MISS.

Two men engaged in a fight in which one was badly wounded in his right arm in several places; one was a deep, narrow cut, making a V-shaped flap just below the shoulder joint on the posterior part of the arm; close by it a slight cut; about three inches above the elbow was a long gash of three or four inches, running parallel with the bone and, therefore, parallel with the brachial artery, passing just in front of the cephalic vein and the humerus and the back of the brachial artery. The wound was large and gaping, at least an inch and a half wide across its centre. The hemorrhage was inconsiderable though the citizens who saw the man soon after he was wounded thought the hemorrhage was very great. I arrived in about three hours after the fight, and found the wound had only received as a dressing a wet cloth and a twist of tobacco. I washed the arm, using hot water, and proceeded to close the wound with interrupted sutures; but the first attempt to make a stitch caused the man to cry out at the top of his voice, "I can never stand that without chloroform!" But, after several unsuccessful trials, I gave him morphine and whisky,

which done away with the excessive nervousness, and I could then close the wound. The man was very weak, and complained of great nausea and inclination to faint. The face was bloodless, the eyes wore a wild expression, and the pulse was weak and small; altogether, he presented an unpleasant aspect; but, supposing the unpleasant symptoms to have been caused by the hemorrhage immediately after receiving the wounds, I thought but little about the cause until I was called next day and recognized the same condition—not improved, but more marked. The patient had suffered from a severe pain about his elbow, and had taken four doses of morphine. His appetite was gone, and he was so completely exhausted that he could not turn himself in bed. After a thorough examination of the case, I could form no rational opinion of the cause of the great depression, except that of fear—an extreme degree of demoralization. As there was no hemorrhage and the wounds were doing well, I thought the man would surely cheer up, but the next day had not made any favorable change in the case, but a slight hemorrhage of venous blood had deepened the depression. I now explained to the patient the danger from the fear, and cheered him up all I could, and, although he promised to do his very best to drive fear from him, I could not see any favorable change in the next twenty-four hours, but all rather more unfavorable, and, in addition to the former pathological condition, there was now a jaundiced condition of the skin and eyes. He was moved a distance of four miles, and expressed himself as feeling better, but soon he had a slight hemorrhage; the wounded arm became puffy, the tongue was dry and contracted, the pulse full and fast; the wound near the elbow was red, hot and tender. I introduced a probe and found the wound filled with a dark blood too thick to discharge. Acid drinks and veratrim were prescribed. Carbolic acid water had been used but was replaced with a poultice of ulmus. That night there was another hemorrhage, consisting of the contents of the wound and ceased as other hemorrhages had done—i. e. without any assistance save a wet pack, applied by the nurse. Next day, I found a high range of temperature, the pulse full and fast; the tongue had changed to a full dirty-white condition; the icterus appearance of the skin was more marked; there was tenderness in region of spleen and loins, and a tympanitic condition of the abdomen. I prescribed sulphite of soda and small doses of podoph., the verat. to be continued, chionanthus, etc.

I requested Dr. Fowler, of this place, to meet me on the following morning. Our conclusions were that the patient could not live unless there was a favorable change. He was better in several respects next morning—which was the eighth day—but that night there was another hemorrhage, which closed as did the others, but the patient sank rapidly and died soon after the hemorrhage.

On the seventh day the pulse was very full and strong. I have never seen a case with a pulse so full, hard, and exhibiting such power, except one of powerful eclampsia. The brachial artery could be traced with a probe in the wound, and also the length externally especially, entirely by the wound near the elbow (the others adhered nicely).

Now, the pretty part to Eclectics is yet to be related: The mayor thought it was his duty to have a post-mortem examination to ascertain, if possible, how far the wound contributed to a fatal termination of the case, and, therefore, notified the County "Boss" of the State Board of Health, who, by-the-way, I am creditably informed gets the enormous sum of five dollars for a post-mortem anywhere in the county. The doctor was soon on hand, and, with a neighboring Allopath, proceeded to hold an *autopsia cadaverica legalis*, so called. A jury was summoned, and as a fountain of wisdom was about to be tapped, "the natives" also gathered in, among which was one of our M. D.'s who is not scientific enough in his old age, although formerly a member of the State Medical Association (Allopathic), to be recognized by the regulars, and, therefore, he, with all others except the jury, officers and the two "regular" physicians, were ordered "to stand back fifty yards!" The writer was not honored with an "invitation," and the "Boss'" report showed most conclusively that my presence would have "spoilt some of the fun," as, in it, the doctor claimed that the brachial artery was severed (or split for several inches as the wound ran parallel with the artery), and that the death of the man was caused *directly* by the wound! Did any one ever know of such a remarkable case—i. e. a man to live eight days with the brachial artery severed, without any compress or ligature? One of the scientific gentlemen was interrogated by a juror as to the cause of the artery not continuing to bleed; "Oh!" he said, "a clot was formed where he first punctured, which prevented hemorrhage!" If I had not noticed the full pulsations of the whole artery, especially that part which

passed the wound, on the day before the man died, I would have thought of some great mystery connected with the case; but reviewing the facts as they occurred and then hearing of the peremptory order for *all*—which would include the doctor, who was only a spectator—to leave the ground while the examination was going on, I can understand the Allopathic story. No mystery about it!

ALBUMINURIA; ITS RELATION TO IMPAIRED ASSIMILATION.

(Continued from page 219)

The more we study these so called constitutional diseases the more we are led to class them among the diseases caused by some wrong in the great sympathetic nerve system. Assimilation is a primordial act in organic nature, and in the higher order of living beings the functions of life are essentially of a reflex nervous character. Nerve centres preside over various functions. The vaso-motors controlling the supply of the blood-bearing nutrients, the excito-secretory nerves controlling the functionation of the protoplasms of secretory cells, trophic nerves controlling the assimilating activities of the individual tissues. Experiments are not wanting going to show how nutrition may be modified and even perverted by irritation or sections of certain nerves going to parts, the centres from whence they spring.

Albuminuria is one of these diseases; all the phases of its evolution is in attestation of the correctness of this opinion. It may be said that all the changes in structure found in the kidneys are not the cause of the disease any more than are the changes in structure found in the lungs in pulmonary consumption due to the lungs themselves. Both are diseases arising from depraved and perverted nutrition. The transformations which the hepatic cells bring about in the peptones are essential to insure normal nutrition. These transformations are under control of the ganglionic system. If this nervous influence is impaired, the cell-life is also impaired, and so must be its functions.

It is not uncommon for men to have dyspepsia all their lives and still live three score and ten years or more, and then died, not of albuminuria or tubercle but of old age. These men have not the peculiar disordered state of the sympathetic system, which is essential for the engenderment of albuminuria. Again, we find large numbers of persons whose gastric and duodenal di-

gestive functions are so weak that only a minimum quantity of food can be digested; yet these persons are not necessarily victims of albuminuria or tubercle. What, then, is the cause of albuminuria? We answer, A profound impression made on the great nervous mechanism that controls nutrition.

Note the high blood pressure, the loud first sound of the heart, the intensified cardiac stroke, the toxic accumulations in the blood. All these are vital in their nature—that is, due to some marked irritation of the nerves of organic life. The outcome of all these is overtaxation of the secreting epithelium, of the heart-muscles, of the vaso-motors, of the excito-secretory nerves.

Epithelium is the first to suffer, because it is the instrument through which the excito-secretory function works out the formulæ of life. Cripple the epithelium tissue of the complexly built animals and the work of its organism is at once thrown into confusion, the result of which is to mineralize the organism rapidly.

What is the treatment best adapted for the cure of albuminuria? We answer, Rest. Rest to the digestive and assimilating and nutrial functions. We mean rest in its strongest and most far-reaching meaning. A person suffering with albuminuria should be a recluse—become a barnicle—to avoid engendering too much urea and other effete nitrogen compounds in his system, that need to be cast out by the renal epithelium. In this disease you have to do with weaked organic nerve force and weakened epithelium.

The simplest food that the system can live on—that is the food containing as little nitrogen as possible—is to be rigidly adopted. Some nitrogen in the food is essential for the support of life, but a person who maintains as perfect quiet of bodily activity will evolve far less urea than one whose muscles are in use in the acts of locomotion, and consequently will need far less nitrogen in his food. Only think that men have lived forty days without food, yet sustained no ill results! A man can live on ten parts of starchy or amylaceous matter, four parts of fat, and one part of nitrogen in twenty-four hours, if he maintains the state of rest. This is the grand point to carry out to its fullest extent in the successful treatment of albuminuria.

As a corollary of this treatment, we have restoration of the organic nervous system, renewal of the life of the epithelium of the kidneys and the protoplasm of the liver and other glandular cells.

We had a case recently of this disease in which the quantity of urine was cut down to 10 ounces per diem, loaded with albumen equal to fully one-fourth; general anasarca, a dilated and weak heart, and hot, harsh, dry and scaly skin. Has been an invalid for eighteen months, reduced to a skeleton; has had all the symptoms from first to last of Bright's disease. Has been treated for dyspepsia, heart disease, diabetes insipidus, and finally for albuminuria, by a number of physicians at one time and another during his sickness. As soon as we saw the case we ordered continued lying in bed under a blanket; moved his bowels with small doses of sulphate of magnesia, only enough to keep them soluble, which required hardly 30 to 60 grains repeated every four hours; cut off every bit of food, save one part milk and two parts water—one quart per diem. Some arrow-root was allowed. The sulphate of magnesia was given in 30-grain doses, three times a day for ten days, then only once a day. This simple kind of treatment was continued four weeks, steadily, during which time the anasarca slowly disppeared and the urine was increased in quantity per diem between 20 and 30 ounces; albumen reduced to one-fourth; urea less than one-eighth, what it was; the acid reaction much feebler, the heart sounds stronger, and the pulse reduced from 140 to 80 in less than one month. A month after, he took cod-liver oil, ½ teaspoonful three times a day. After two months of this treatment the albumen was reduced to a trace; bodily weight had increased five pounds; sleep and digestion good. Occasional doses of sulphate of soda, to move the bowels slightly, as his diet has a tendency to cause constipation. In two months more he was well—no albumen in urine. Diet is now bread and milk.

Albuminuria commences as a disease of the organic nervous system and finally becomes a dyscrasy. The blood is constantly kept poisoned, the leakage of albumen is only a sign of the fading powers of the epithelium of the malpighian tufts to prevent the albumen of the blood passing along through the laboratory of the kidneys. The main point to insure successful treatment is to determine the least possible quantity of nitrogen in the food each patient can get along with. There is great variation among men in this particular, and those who can comfortably make shift on a very small quantity, other things being equal, are the most sure to get well if the other part of the treatment is carried out. Such patients drink very little water, if left to their own choice

and appetite; yet they need considerable bland fluid to wash out the glands and clean out the uriniferous tubes of the debris that has collected in them. Water is the natural diuretic and the universal solvent. Such patients must drink soft water liberally. Hard water is injurious to them, because its salts irritate the kidneys in passing through the tubules in the urine. Keeping such patients in bed for several weeks, even months, is of paramount importance, especially when there is a great deal of albumen in the urine and the heart has become weak and dilated.

We have pursued the method of treatment herein presented for several years. Others, who have adopted it in this disease, have been greatly pleased with the results obtained. We have no hesitation to affirm that it is the most successful because the most natural, being in accord with purely physiological principles. The doctrine of physiological rest must become the corner stone of our treatment of this and many other so-called constitutional diseases.

GERMICIDES—GERMITOXICS.

BY I. J. M. GOSS, M. D., MARIETTA, GEORGIA.

Hitherto writers have mostly used the terms Germicides, Disinfectants, Antiseptics, interchangeably. A disinfectant is simply a substance, the chemical power of which is to arrest the spread of certain poisonous effluvia in the air. Deodorants are such as will destroy the foul odors of putrid substances. Germitoxics are those chemical compounds which arrest putrefaction, and thereby arrest the spread of infectious and epidemic disease, by chemically decomposing and destroying the poisons upon which such diseases depend. Some articles act as germitoxics and disinfectants, as permanganate of potassium, zinc chloride, lead nitrate. Then there are certain gaseous bodies that purify the atmosphere, as ozone, chlorine, iodine, bromine, nitrous acid, sulphurous acid, and phenic or carbolic acid. Dry heat will arrest the contagious particles, when applied to the clothing of persons that have been exposed to contagions; it must be as high as 212°. Chlorine acts as a disinfectant. Nitrous acid vapor is likewise a disinfectant; so is carbolic acid. The sulphate of iron is claimed also to be a disinfectant, but it is doubtful if it does more than to arrest the escape of ammoniacal gases. It is a germicide, and destroys small insects. Germitoxics are agents capable of destroying the contagium of communicable diseases. Antiseptics are

agents which have the chemical power to arrest the spread of disease, not only by chemical action but by exerting a poisonous effect on the septic microzymes causing the disease. Carbolic acid, zinc chloride, boric acid, salicylic acid, sulphurous acid, bi chloride of mercury, and perchloride of iron, are used as germicides, and often as local applications in some skin diseases. A germitoxic is a substance that destroys the life of germs by poisoning them, and arrest the disease that the germs have set up in the system. Their application, as yet, is limited, but an inviting field has been opened up to the scientific investigator.

The day is not distant when men will cease to give rotinely certain remedies, because some old musty volume recommends them. Pathology will soon be the guide to therapeutics. In the past, undoubtedly great damage has been often done by antagonizing Nature's efforts at cure. The true law of therapeutics requires the antagonizing of the cause of disease, rather than to strike merely at the sequence.

One of our promising germitoxics is the oil of wintergreen, and the salicylic acid made from the wintergreen. These are germicides that may be used without any great risk to the patient. They have been used for rheumatic fever—for which they are efficient, upon what law we are not decided. But they prove efficient in typhoid fever, pneumonia, and in Summer diarrhœa of children. Many failures occurred when salicylic acid began to be used in rheumatism, but most, if not all of them, were from the fact that most of it was manufactured from carbolic acid, which last does not possess the therapeutical value of that made from the oil of wintergreen.

In treating disease thus, upon the pathological principles, the science of therapeutics is not fully developed; consequently we cannot easily differentiate in each case. We find that different microbia are killed by different kind of drugs, and we have to be careful that the germitoxics that we select are not poisonous to our patients.

When this new science is more fully developed we will have a system of medicine worth our investigation. In diphtheria the permanganate of potassa and turpentine, locally applied, whilst the baptisia tinctoria is given internally, has proven the most successful with me in this dreaded scourge. In typhoid fever, the oil of sassafras, salicylic acid, and baptisia tinctoria have proven the most satisfactory. Years ago, I used an emulsion of turpen-

tine with good effect; and when the germitoxic principle of the turpentine is separated from the oil, as salicylic acid is from the oil of wintergreen, then we will have another valuable acquisition to our list of therapeutic agents. Iodine has proven valuable with me in old cases of relapsing fever; and also the fucus marina has, of late, proved very efficient in old and recent cases of malarial poisoning. It seems to act almost if not with the certainty of quinine.

ALLOPATHY vs. REGULAR.

BY J. M. HOLE, M D., SALEM, OHIO.

The case now pending before this country in which Allopathy btings suit against Regular is upon the following bill of particulars:

First. Regulars have retained all the medicine, instruments, and appliances belonging to Allopathy, and are using them upon all occasions and cases when they are regarded advisable by them.

Second. While thus appropriating and using any and all the remedies and appliances belonging to Allopathic lore, as well as their medical literature, they claim to be not Allopaths, but "Regulars"—thus the *name*, for the purpose of practicing fraud and deceiving the people by their claims to be Regulars.

Third. That Regulars are, to all intents and purposes, traitors to the great Allopathic cause, and should be regarded in the same light as all traitors are—that of obtaining popularity and money upon fraud and false pretense; and that Judas, who betrayed his Lord and Master, is exemplified in their acts, and the fate of Judas only awaits all such traitors.

The prosecutor said:

"May it please the court and jury—This case is one that should be fairly and plainly explained and understood. Regularism in medicine is only of brief origin. We have been in the medical ranks forty years; is there any man now living that knew of, or ever heard, the term Regular used or claimed as a class or sect of medical practioners even twenty-five years ago? Certainly no man ever thought of claiming such a name thirty years ago; hence Regular is. to all who are at all conversant with medical history, regarded Allopathic, or, if not, is using and sailing under her colors, while denying their parentage; hence

is a miserable hypocritical, lying, fraudulent set of traitors, and should be spurned by all honorable people.

"Allopathy is very ancient. It goes back in history to that celebrated Paracilsus, he who introduced mercury or quick-silver into the Materia Medica, hence it has been honored and cherished for ages upon ages by many nationalities. But now, when science and the general intelligence of the great mass of the people have discovered its general weakness, deformities, and failures, her legitimate offspring, the Regulars, reared in her 'temples,' fed from her 'breast,' and having enjoyed all her privileges and immunities, suddenly and without cause deserted her name, and set up the claim of Regular (which should have added to it Traitor, so that it should be 'Regular Traitor to Allopathy') solely to deceive the people, as we believe.

"That while Allopathy has been thus imposed upon by those she regarded of her own household, and now are endeavoring to make the people believe she is so old, unattractive, and powerless, and has no claims to respectability, she now demands judgment against the Regulars, for the use of all her appliances and ancient medical classics, and modern endowments, they have taken with them in their treachery, and traitorous course, since they have cast off her ancient and honorable name for that of Regular.

"And she further wants it distinctly understood that she regards, and acknowledges with pride, open enemies, like the Eclectic and Homœpaths, in their course towards her. When they openly rebelled against her, they simply exercised the right of 'revolution,' and went out before the people with their banners flying, and ready to give and receive 'hot shot' from their 'Armory.' They made no claims to belonging to Allopathy, or to use her modes and appliances; in a word, they set up for themselves, independently—choosing their remedies and managing their cases in their own way—while all the now self styled Regulars clamored, abused, and otherwise mal treated them. Yet, in a few years, they have acted traitorously while claiming faith *privately* with Allopathy, they, Judas like, deny any allegiance to her before the people.

"Such conduct should receive the severest condemnation from a candid World. We, therefore, in conclusion, ask the court to pass sentence in accordance with the enormity of their crime—well knowing that the jurors are capable of giving a verdict tha-

will condemn all those who are practicing upon a fraudulent and false pretense 'foundation,' and will finally relegate all such to medical obscurity, where they belong!"

TREATMENT OF PELVIC CELLULITIS FOLLOWING PARTURITION.

Dr. Graily Hewitt, in an article on this subject, calls attention to the chronicity of the disease, its tardiness to get well, and the very essential and important aids rendered to treatment by strict attention to proper nourishment. He claims that deficiency of food may predispose to cellulitis when other factors to its cause may be present, or may render a ready existing case less amenable to treatment. Rest, so important, must be supplemented by proper food and careful feeding. Loathing of food or want of appetite, or careless regard for the proper feeding of the patient, all tend to create farther weakness or render the disease more obstinate and chronic. Well-made broth, beef extract, milk and cream and a due amount of easily assimilated fat, with proteids and carbo-hydrates, are to be provided, and the patient fed with the care bestowed on fever patients. Chronic pelvic cellulitis is a disease of low nutrition, and none but constitutionally feeble women are subject to it. In these, appetite and assimilation are at low ebb, and to better them must be the prime object of the physician's treatment.

In addition to hot poultices over the abdomen, other local treatment is often of special advantage, such as the irritating plaster of our Dispensitory, applied over the sacrum or on the lower part of the abdomen—a method of treatment with which the old Eclectics were so very successful in curing chronic inflammations of all parts of the body. Painting the sacrum and part of the lumbar region with tincture of iodine, in which 8 or 10 drops of croton oil are added to the fluidounce, and repeated every day or so; also, we have in the compound stillingia liniment, well rubbed into the skin over the sacrum and the abdomen, a valuable local application in these chronic inflammations of massive cellular plains. But few nowadays refer to the remarkably curative properties in this class of diseases of the green root tincture of stillingia, which, on account of its efficiency in cellulitis of all parts, is entitled to be recognized more fully than it is.

An excellent disculent and anodyne ointment can be made as

follows: Stillingia root (green) pared in thin slices, 4 ounces; green stramonium leaves, 6 ounces; yellow dock root (green), pared in thin slices, 6 ounces; lard, 8 ounces; place these ingredients in a suitable vessel, which is to be put on a water bath and kept heating for six hours; after which strain and press. This makes an excellent base, to an ounce of which a drachm or two of extract of bellandonna and the same quantity of quinine sulphate can be worked in. Rub into the skin on the lower part of the abdomen, the inside of the thighs, and over the sacrum, a piece as large as a hickory nut, twice a day.

The following is a good anodyne and sedative to the pelvic organs: ℞. Sol. ext. hyoscyamus, ʒ ij; sol. ext. belladonna, ℈ i; sol. ext. nux vomica, ℈ i. M. ft. pill, No. 80. S. One every six hours. Continue them till the throat and mouth become slightly dry and the pupils dilated. Excellent service has been derived from them in female pelvic diseases. The bowels are kept soluble by them; pain is mitigated, and rest procured by this treatment.

The best counter-irritant we have in these cases is our irritating plaster.

The valuable assistance our uterine tonics render in promoting the curative process is often remarkable. Always combine stillingia syl. with senecio aur., aletris far., helonias dio., etc. The old Eclectics used the tincture of burdock seeds, made by maceration in whisky—1 pound of the ground seeds to 1 gallon of whisky—a teaspoonful three or four times a day. This frequently effected speedy cures in chronic cases. In point of fact, burdock seeds is the great medicament in cellulitis, eczema, lupus ex. and old white swellings. Have the vagina washed out every day with a hot solution of borax, ʒ i; water, 1 pint. Use a quart of this every night for a week, then suspend it, and resume again in a few days.

Iron is needed in anæmic cases. The following formula will be found of service: Macerate iron wire, cut in small pieces, in good sharp cider vinegar. Give 2 teaspoonfuls three times a day.

A good aperient is found in the sulphate of soda, 30 grains; sulphate of potash, 10 grains, dissolved in a tumbler of hot water, and taken two hours after meals. This promotes digestion, and will make the urine alkaline, and act on the glandular system. For many respects it will be found to have the same effect as the iodide of potash. Reduce the dose when the bowels become soluble.

THE PHYSIOLOGY OF COCAINE,

locally, is an irritant to protoplasm. Of this there is hardly any doubt. It acts on the fusiform muscular elements of the arterioles thus causing intense contraction of the calibre of vessels, obliterating the lumen and emptying them and the tissues they supply almost completely of blood. In this way the life of the tissues is brought in abayance as long as the local action continues.

Its action in mucous and cutaneous surfaces is due, we believe, to this cause, and is explained as follows: The endings of the nerves are paralyzed by the bloodlessness of the tissues in which they ramify, caused by the vaso-motor contraction of the arterioles under the irritant influence of cocaine.

Jessop assumes that cocaine acts as an irritant to the endings of the cervical sympathetic. We think it acts on the ganglion elements of the nervous system, irritating them, which is followed by a corresponding paralysis of function as a natural consequence.

The action of cocaine as a powerful vaso-motor stimulant is hardly to be doubted. In the excited state of tissue the concentration of activity is in and around the millions of centres of protoplasmic points within the radius of the irritation toward which blood is crowding in profuse quantity, and with it are going the elements of nutrition and highly excites leucocytis that immediately enters into proliferating activities. Cocaine applied to these excited parts quenches the fire at once by stimulating the vaso-motor endings and also acting in the same way on the fusiform elements in the arterioles, the blood is cut off and death commences to reign in the parts, that suspended animation lasts so long as the energy of the cocaine continues.

This fact, coupled with the others, viz., that cocaine stimulates the ganglionic elements of the nervous system to a great degree, makes cocaine a dangerous remedy, a two-edge sword, fearful and terrible in its mighty powers. But notwithstanding all these dangerous qualities, cocaine is a most valuable remedy, but needs great caution and judgment in its use.

WHAT IS A LIVING CELL?

A living cell is owing to the complex arrangement of the atoms of which its molecules are composed, by reason of which, these molecules are undergoing disruption of equilibrium, which re-

sult in producing the chemical and mechanical phenomena peculiar to living things.

The complexity of the atomic structure of the molecules of organic matter and the equally complex arrangement of these molecules into definite cellular forms, contribute some of the properties of the colloidal state organic matter assumes. It is in this state, that matter, assuming the organic condition, can take on the molecular instability and intense mobility of atoms, which result in giving out in the highest sense, dynamic manifestations. Hence, we find that this state of matter (the colloidal) the best adapted to take on constant molecular changes and give out the energy called vital. We may then define a living cell as being in constant process of alternately destroying and renovating itself.

The chief and most important conditions to life are, in certain relations between the inner sources of energy and the outer world being kept up to a certain standard of intensity of action. To this end, we find a constant osmosis actively going on between the molecules of the living organism and the external world whereby nutrients in solution and holding oxygen in a loosely fixed combination are supplied. There is thus established a double current, one carrying nutrients into and the other bringing effete crystaloidal material out from the molecules, to be expulsed. The living substance or cell is therefore a chemical laboratory, an electro-dynamic machine and a compound dialyser. Its atoms are animated in a way peculiar only to organic life, and thus they transmit, one to the other, movements, by which the molecules, into which they form themselves, transform themselves into ways innumerable, and assume conditions best adapted to the constant manifestation of that dynamic force called vital phenomena. Therefore, a living cell has in itself an independt ent life, and whether it exists separate as one life or is agrigated into colonies forming being more or less complex, even up to man, the life of the individual whole is the sum of the life of the individual units.

BAD BREATH.

BY W. H. HALBUT, M. D., LEBANON, TENN.

I meet, quite often, with physicians the odor of whose breath is so offensive that it nauseates one's stomach to be in their presence. It is to be wondered at that such practitioners are not abruptly discharged from the patient's room.

Having had a little experience about my own "bad breath," several years ago, I began the use of the following prescription: I keep, as an antiseptic, in my medicine case, a 2-ounce vial of glycerine, holding in solution 2 grains of thymol and 40 grains of sodium borate. I take 1 or 2 drachms (one drachm will do) of this and mix it with 8 ounces of soft water. After washing my teeth, using a brush, with fresh water cleanse the brush, saturate it with the above solution and again brush the teeth. This is sufficient for twenty-four hours. It is preferable to use it every morning. It will not only keep the breath sweet but will preserve the teeth.

[Offensive breath may come from catarrh of the tonsils or of the base of the tongue, as well as from decay of the teeth. The application of this solution to these parts where the seat of catarrh is may cure the affection and remove the cause of offense. The constant decomposition of the catarrhal secretion is the cause of the odor complained of, and Dr. Halbert's prescription seems well adapted to effect a cure. With some people offensive breath is constitutional.—ED. JOURNAL.]

THAT TROUBLESOME OLD WOMAN.

BY R. T. HILLMAN, M. D., SENOIA, GA.

It is said that everything is to subserve a specific purpose, and that moral statute of "the survival of the fittest" is the only exorcisor of the right of mundane life; that the tadpole, if he be the fitter of the two, can say with equal propriety to man, "why cumbereth ye the ground?" This all does very well till one has to contend with a meddlesome old woman who haunts the bedside of the physician's patients and, like Banquo's or anybody else's ghost, "will not down" at one's bidding. If this trouble assumes a much more formidable aspect, the doctors had better turn the business over to the old women and be done with it. They might do well in their place, but that place, so far as medicine is concerned, is Shoel! Thanks to the new Revision, for one can curse now without doing violence to what little religion he claims to possess, and the amount depends largely upon the time he has had to recruit since his last collision with one of these medical viragos.

I know an old woman who gives kerosene oil for every disease recognized by the profession, from pseudo-membranous croup to

a mild case of chicken-pox. Know these old women? I tell you, Yes! and with as much zeal as characterizes that expression of Hamlet when he exclaims, "Alas, poor Yorrick! I knew him well!" I have seen them treat with utter indifference that little writ known among doctors as "the Code," and prescribe for the patient *nolens volens*. "Doctor," I have heard them say, "don't you think this baby has got the purple hives?" Not knowing exactly what to say, I would nod assent, and then she would call out her list of remedies, beginning, perhaps, with catnip tea and ending with life-everlasting.

I am completely open to conviction upon any line of argument that will suppress these medical nuisances, and would be delighted with the remedy.

DRY TREATMENT IN DISEASES OF THE EAR.

When the discharge is profuse it is best to begin the treatment with syringe and mop, to lessen the exuberance of suppuration and stimulate the parts to take on steady granulation. To this end we have nothing better than a dilution of fluid extract pinus canadensis—1 part to 4 of water—to which may be added to every ounce of wash 5 grains of borax. Syringe twice a day; mop out the ear by wrapping a lock of absorbent cotton around the end of a probe, to remove all fluid, and fill the ear with dry borated or iodoformed cotton. As soon as the discharge is lessened in profuseness then resort to dry treatment. Procure very finely powdered boric acid; be sure it is impalpable; then introduce an ordinary tubular ear speculum gently down to the drum; through this put in the boric acid, gently tamping it down with a probe around the head of which a lock of cotton has been wrapped. As the boric acid is tamped in, gradually withdraw the speculum, and when the canal is half full draw out the speculum and finish the work by putting a plug of cotton in the meatus. This dressing will not need to be disturbed for three or five days, when it may be necessary to remove it with the syringe and warm water; then dry out as before and refill again. This simple treatment of "sore ears" has served us better than any other we have ever adopted, and is valuable in adults and children. Occasionally we have added one-half the weight of the boric acid of bismuth subnitrate. Some bismuth is very irritating; the same is true of boric acid, which often contains impurities, as acids and other irritants. The main point in using both boric acid and

bismuth in this class of cases is to be sure that these agents are perfectly free from impurities. Mallinckrodt, of St. Louis, Mo., makes very superior articles of bismuth and boric acid. Iodoform cotton is made by soaking absorbent cotton in an etherial solution of iodoform; squeeze out and dry; then keep in glass-stoppered bottle in a dry place. Borated cotton is made by saturating absorbent cotton in a solution of boric acid in water and glycerine, dry in shade and keep well secured from dust. Both are excellent for treating ear diseases.

SALICYLIC ACID IN FEVERS.

BY E. R. WATERHOUSE, M. D., GENEVA, OHIO.

For sometime past I have been using salicylic acid in typhoid and other fevers with a degree of success, which is, to say the least, very gratifying. When the patient complains of pain in the limbs, back and head, and the feeling of utter wretchedness pervades the entire anatomy, the bowels loose and tender to the touch, the tongue of that raw-beef appearance, or in some instances red, with an inclination to turn brown, then it is that the system calls loudly for antiseptics to combat the changes which are being wrought in the circulating fluids. Under these conditions salicylic acid is a remedy that will serve us admirably. Under its action the tongue changes in appearance, the pain in the limbs and back subsides, the pulse instead of the voluminous angry stroke becomes soft and kind.

It is needless to say that the patient feels better. The bad taste in his mouth has changed, (and as expressed by one of our college teachers) he can no longer smell himself across the room—the stench is gone. I do not wish to convey the idea that this one remedy alone is to be used in all fevers. There will be numerous instances where other remedies will be specially indicated and should be made use of. Neither do I wish to be understood that salicylic acid will break up a typhoid fever, but if properly administered it will transform the majority of dangerous fevers into milder forms and shorten their duration.

I would advise a trial of this drug under the specific indications for muriatic acid or with the slick sulphurous acid tongue, or I may say, in any case where we wish an antiseptic action in combination with an acid. It will not destroy the teeth, nor is it as harsh, in its action upon the digestive organs as the mineral

acids. I usually administer it in doses of 5 to 10 grains in capsules every three or four hours. I prefer the salicylic acid from wintergreeen oil, that in powder being more soluble in the stomach than the needly crystals. The common commercial salicylic acid should not be used as an internal remedy (made of carbolic acid and caustic potash) as it is liable to act as a cardiac depressent when given in even moderate doses.

ABSTRACTS.

TREATMENT OF TRANSVERSE FRACTURE OF THE PATELLA.—A paper, by Dr. Conrad Brunner, of Zurich (*Deutsche Zeitschrift fur Chirurgie*, Band xxxiii, Heft 1 and 2), on the 'Treatment and Results of Transverse Fracture of the Patella,' concludes with the following comparative estimate of the results of bloodless and operative methods of treatment. The author's conclusions are based on a study of forty-four cases treated at Zurich, and of a large collection of previously published cases:

In considering the question whether the treatment by puncture has any advantage over the expectant method, the author states that the results of the cases treated by Schede justify the assertion that osseous union is more likely to be attained by the former plan. In three out of five cases thus treated by Schede, there was union by osseous callus. In two only of thirty cases recorded by Brunner was there osseous union; and it is stated that such a result was not observed in any of 117 cases collected by Hamilton. The author's tables do not support the view that the plan of puncture tends to shorten the duration of treatment. The average length of the treatment in hospital, in Schede's as in other lists of cases, was seventy days. Brunner's records are opposed to the statement frequently made that the articular effusion, if not removed, usually results in chronic hydrops. Puncture, it is granted, may be practiced as a safe and useful method in cases of very considerable hæmarthrosis, but in fracture with slight or moderate intra-articular effusion, it is quite unnecessary. It has the advantage over the expectant method, that it is more frequently followed by osseous union of the fragments. That better functional results may be thus attained, remains to be proved by more abundant statistics than than we at present possess. With regard to Volkmann's method of

schnennaht, in which the fragments of patella are brought together by sutures passed through the tendon of the quadriceps muscle and through the ligamentum patellæ, Brunner states that the results hitherto attained have not proved better or worse than those of older and less dangerous methods. In an allusion to Kocher's 'peripatellar' suture, in which a loop of wire is passed subcutaneously around the fragments, and to the reports of Oberholzer on this treatment, it is stated that a method, which in its application to seven cases of simple subcutaneous fracture of the patella has twice caused suppuration in the knee-joint, and once has resulted in death, is not to be commended.

The author next considers the question whether the results hitherto obtained by free incision into the knee joint, and osseous suture, in cases of subcutaneous fracture of the patella, are such as to justify such practice. He is opposed to those who hold that such treatment is indicated by the alleged failure of other and older methods to attain a good result with regard to the function of the limb. Whilst acknowledging the disadvantages of non-operative methods, such as the long duration of the treatment, the very rare occurrence of osseous union of the fragments, and the frequently observed atrophy of the muscles of the injured limb, the functional result of such methods, he holds, is, in the majority of cases, such that locomotion is but slightly, if at all impaired, and the patient is able to resume his occupation. The chief object in the treatment of fractured patella is the restoration of the fuction of the limb. It has been stated as an objection to non-osseous union of a broken patella, that the ligamentous bond of union, from a failure of due resistance, may be torn through on the subsequent application of slight force. Brunner holds that such is not the case. The cases he has observed of secondary fracture prove that the newly formed ligament is stronger than the bone; and it has been proved by Maydl that firm and close union of the fragments favors rather than protects against secondary fracture. In thirty out of forty-five cases of suture of the fragments, collected by Brunner, the result of treatment was good; and in thirteen of the cases osseous union and complete restoration were attained, in much less time than is ever taken by bloodless methods. Against these successful cases, however, are placed eight of intra-articular suppuration, eight of ankylosis, two of amputation of the thigh, and two which terminated fatally. Referring to the still more

unfavorable returns of Chauvel, and ascertaining as facts that subcutaneous fracture of the patella is not a fatal injury, and that surgeons are acquainted with other and simpler methods of treatment which, without subjecting the patient to any risk, will enable him after a time to resume his occupation, Brunner holds that the operation of osseous suture is unjustifiable, save in some rare instances—as for instance, intra-articular suppuration after puncture—in which it is specially indicated. In considering the indications for this operation in cases of old fracture, Brunner acknowledges that fracture of the patella, when the fragments are widely separated, is followed by impairment of function, and that owing to careless or bad treatment, the injured limb may be rendered quite useless. Here it is conceded the operation may be performed as a last resource. In most cases, however, of badly united fracture of the patella, Brunner holds that it is not the separation of the fragments alone, but chiefly atrophy and insufficiency of the quadriceps muscle, to which lameness is due, and that the operation, whilst removing the first cause, will not influence the second. In cases of faulty union and lameness after recent fracture, it is advisable to wait before deciding on operative treatment, as it has been proved that there is often much improvement in the condition of the limb in the course of time. In all such cases, operative treatment should not be resorted to, until after a fair trial of faradization of the extensor muscles of the leg.—*London Medical Record.*

A SIMPLE METHOD OF REMOVING WENS.—(Translated for the Northwestern Lancet from the Centrablatt fur Chirurgie, June 26, 1886, by Dr. C. Lauenstein, Hamburg.) The skin over large wens of the scalp is often so thin that in the commonly practiced method of extirpation, with a free incision over the convexity of the tumor, the sac is often ruptured, in spite of all care, and through collapse of the walls of the sac, the separation of the skin is rendered difficult and protracted in a disagreeable manner.

This accident, unless it is a case of inflamed wen, may be avoided with certainty by a simple expedient, which has recommended itself to me on account of the rapidity of its execution, and which I take the liberty of describing in brief for the benefit of colleagues to whom it often happens to be pressed for time, or for those who, living in the country, are obliged to operate without skilled assistants.

After shaving and cleaning the neighborhood of the wen, I make a radical cut 1—1½ cm. long through the skin where it is separated from the capsule of the wen, for instance, on the back of the head at the lowest point of the base of the tumor; through this slit I introduce the slender handle of the scalpel used, or a similar instrument, between the skin and the sac, more or less deeply, according to the size of the tumor: this is very easily accomplished, and I then make several sweeping movements of the scalpel handle to the right and left, thereby separating with ease the sac from the skin. The elasticity of the skin allows almost the whole circumference of the wen to be separated in this way in a few seconds. I then cut, with one snip of the scissors, the skin over the crown of the tumor as far back as is necessary, and shell it whole from its seat. There is often no bleeding because of the division of the vessels of the sac by a blunt instrument. The rest of the treatment—sutures, drainage—is not affected by this procedure; nevertheless, I would add that any crushing or tearing of the edges of the wound is completely avoided.

I believe that any one who has once removed in this manner a wen lying under a very thin skin will never again begin the little operation with a free incision over the convexity of the tumor.

IODOFORM IN FISTULA.—A contributor to the Peoria Medical Monthly gives his experience in the treatment of an old and long standing case of fistula that had hitherto resisted all the treatment used for its cure. It commenced as a "boil" over the lower end of the backbone, was lanced and contents evacuated resulting in the formation of the fistula tract, perhaps two inches or more in depth directly over the lower end of sacrum and closely hugging its spine. The surrounding parts, together with the tract itself, had become thickened and hardened, and presented an opening about a quarter of an inch in diameter. The treatment was as follows, as the writer gives it: "I used a uterine suppository carrier which I had at command, filled it to the depth of about an inch at a time with iodoform, and often inserting to the bottom of the fistula, with the piston pushed the powder out, and repeated the process thus until the cavity was entirely filled with the powdered iodoform. Under the influence of several repetitions of the treatment the fistulous opening has

been closed now for several weeks and the tissues about the seat of the disease have become more healthy in appearance and feeling, and soreness and tenderness have in the main subsided.

AN ANODYNE FOR USE IN VESICAL IRRITATION.—Dr. W. P. Copeland, of Eufaula, Ala., writes: "In almost every community there are old men who suffer from enlarged prostates, accompanied with a chronic inflammation of the neck of the bladder, rendering them miserable sufferers, and a care and anxiety to their friends and families. Having had the professional care of several of this class of cases, and dreading the tendency they so frequently incur by the administration of opium for the relief of pain, I resorted to various washes for injecting the bladder, resulting in my adopting a solution of benzoate of soda, 10 grains to 1 ounce of water, with 20 to 30 drops of the green tincture of gelsemium; this is warmed, and injected by the patient through a soft rubber catheter whenever the pain is severe, and the catheter withdrawn, leaving the medicine to be voided in twenty or thirty minutes; or where they are not able to pass anything from the bladder the catheter is introduced and the medicine allowed to escape. My experience with this treatment has been so satisfactory that I cannot refrain from giving it publicity in the profession."—*Medical Record.*

A CASE—SPIGELIA.—Dr. James A. Campbell, in St. Louis Periscope: To record cures by the properly selected remedy, may, to the initiated, seem like vain repetition; but in this age of doubts and skepticism it is really a pleasure to see one's faith conspicuously confirmed. I give the following case, not because it is unusal, but to illustrate the brilliant action of a remedy which seldom fails me when indicated—there are remedies which seem to deceive us: Mrs. O. H., age thirty-two; eyes sore more or less for sixteen years—"better and worse." No discharge of matter, but much lachrymation and photophobia, severe pain in and about eyes; shooting back through eyes and behind eyeballs. This was accompanied by a headache characterized by the marked and significant peculiarity that it commenced early in the morning and ceased only after sundown.

Eversion of the lids showed only conjunctival congestion. The cornea was dull and as if mottled. The eyeballs seemed as if drawn in the head.

During the sixteen years spoken of she had suffered from just such trouble, never free from it, but better and worse in turn.

She had received much treatment with little or no benefit. Her vision when I saw her was only 15-200 with left eye. Such was the unhappy picture.

Recognizing the condition as one of purely neurotic origin with the symptoms above given, she was placed under spigelia 6th three times daily. Atrophia sulph. (gr. ii to ℥i aq. destil.) was dropped in eyes every two or three days, for the mechanical effect of keeping the pupils dilated, so that this element of irritation by alternate dilatation and contraction might be avoided.

The improvement was rapid and marked. She reported that after taking the first dose of the medicine it seemed as if her head would burst, but this was the last headache she had, although she had been thus afflicted for so many years.

It might be suggested that possibly the local application of atropine was the remedy which accomplished the work. This may be conclusively answered by the statement that for weeks and weeks before coming under my care, atropine had been used by her medical attendant, as is universal under both schools of medicine.

This improvement thus commenced continued until the afflicted parts had resumed their normal condition and until fully restored. It is now six months since she was discharged, and still all is well with her.

SLEEPLESSNESS.—Dr. J. Milner Fothergill says of sleeplessness: "One broad rule to bear in mind is this: Opium is the agent where insomnia is due to pain; chloral where it is due to a high blood pressure in the arterial system; the bromides, where there is any peripheral irritation. Opium, having a pronounced effect upon the sensory portion of the brain as an analgesic, is the drug par excellence in sleeplessness due to pain. Whenever there is a morbid condition in tense tissues, as syphilitic node for instance, pain on going off to sleep is set up by that dilation of the blood vessels of the system generally which is essential to brain depletion. The effect of pain is to arouse the brain into wakefulness. Where such a complication exists, it is well to combine the opiate with some potent depressant of the circulation, as antimony or aconite. In many cases a full dose of alcohol is sufficient for the attainment of the desired end."—*Brief.*

THE TREATMENT OF PUERPERAL CONVULSIONS WITH PILOCARPINE.—We have two or three times in previous issues alluded to the use of pilocarpine in puerperal eclampsia. Dr. Jas. Murphy, in the *Lancet* for May 29, 1886, publishes notes of three cases of convulsion occurring in the puerperal state, in all of which pilocarpine seemed to reduce the severity and frequency of the convulsions, and all of the cases recovered, a fact which by itself is sufficient to indicate that in all probability the recovery was partly, if not largely, to be attributed to the use of this remedy. The alkaloid was given in the dose of ⅓ of a grain injected hypodermically, as often as every six hours, or more frequently, if necessary.—*Therapeutic Gazette.*

DAMIANA AS AN APHRODISIAC is the subject of an article in the Medical Age, by W. H. Miles, M. D., of Cleveland, Ohio, in which he expressed confidence in the therapeutic properties of the remedy in restoring lost sexaul vigor in patients somewhat advanced in life. The writer makes the point that to obtain this benefit from the remedy, it must be persisted in with regularity and resoluteness. In two cases, men between forty and fifty years of age, both of them unable to perform copulation; excision of hemorrhoids three years before. A cure was effected by the remedy. Dr. Miles says one of his patients found daniama the best remedy used in obstinate constipation.

SEVERAL severe cases of obstructive and conjestive jaundice in St. Mary's Hospital, under the care of Dr. Wetherill, have been quickly and thoroughly cured by full doses of ammonium chloride, after a failure of various other drugs. In obstinate constipation this agent has also proved of much value in his hands.

CIMICIFUGA IN EPILEPTIFORM NIGHTMARE.—Dr. Small, of Maine, reports a case which was cured by the administration of half a teaspoonful of powdered cimicifuga racemosa at bedtime, and a light supper each night. The paroxysm at once ceased, and in a lengthy period of observation there had been no return.

WE have received No. 1, vol. ii of Quarterly Bulletin of the Clinical Society of the New York Post Graduate Medical Schoo and Hospital. Edited by Wm. Oliver Moore, M.D., Seneca D Powell, M.D., Chas. Henry Brown, M.D., Samuel Lloyd, M.D., Clarence C. Rice, M.D., Executive Committee. October, 1886, and containing several excellent contributions.

EDITORIAL

TO PROMOTE THE ABSORPTION OF MEDICINES FROM THE STOMACH administer them in a normal alkaline solution of the temperature of the blood, 100° F. Such a solution would in a way represent the plasm of blood and may contain, say, soda bicarb., grs. xx; phosphate of soda, grs. x; chloride of soda, grs. lxv; water, ozs. viii; ft. We have frequently used this solution by the tumblerfull, drank hot, with remarkable benefit to our digestive powers and prompt relief of the painful dyspeptic annoyances that so often afflict us.

We use this solution also to administer quinine in, stirring up 5 grains of quinine in a large wineglassful of it. As a result, the quinine is more rapidly absorbed than when given any other way, save by hypodermic. We administer podophyllin and other of our resinoid remedies in this with very much better advantage to the patient. In acute, so-called, biliousness, we find this solution, taken hot, affords quick relief to the suffering stomach.

The law of interchange of currents of fluids between the blood and the outside where a veritable dialysis is established from the outer toward the inner, is the law of life, when in the osmotic interchanges that carry on nutrition and denutrition are forced greatly into activity by the presence of this or some such fluid taken, at blood heat, into the stomach. We recall how prominent a part this law of osmosis takes in the process of life. By it absorption, and secretion, and excretion, and capillary affinities, and the detergment of colloidal substance to free it of crystalloidal matter, all are effected through the activity of this dialysis, which ever going on in the living body, and through which nutrition is effected. It is by this law that the blood plasma is, in part, carried to the anatomical elements.

EMMENAGOGUES have recently been a craze. The best one is sought industriously. Permanganate of potash was set up by Dr. Murrell as the best thing in the way of an emmenagogue and everybody went for it. Many a poor woman's stomach has been ruined by the administration of this irritating and abominably nauseous medicament in large doses; for it was claimed that 2 grains must be administered in each dose! The singularity of

the whole matter is, that hundreds of doctors used it in pill, in solution, in capsule and every other way, and every one claimed wonderful results from the use. A wooden woman or a wax doll would menstruate if the permanganate was put inside of it. But few people can take it. We have not had half as good results from it as macrotys has given us. By the-way, let it be known that the infusion of the root of black cohosh is superior to the tincture as an emmenagogue; besides, it is a splendid tonic to the mucous membranes and the nerve centres. The phosphate of manganese, in 2-grain doses, is claimed now to be a reliable emmenagogue. Years ago we used the sulphate of manganese in 5-grain doses, and found it a good emmenagogue; frequently administering it in infusion of black cohosh root. We think the combination as good as anything else.

INTESTINAL DISINFECTANTION in the diarrhœa of typhoid fever and other adynamic diseases may be of frequent service as a means of promoting recovery, destroying, as far as safety warrants, the use of these agents in diseases attended with great prostration of the vital powers. Recently, M. Bouchard has used with success the following formula: R. Vegetable charcoal reduced to finest powder, 100 grammes; iodoform, 1 gramme; naphthaline, 5 grammes; rub these in a mortar to thorough mixing, then add glycerine, 200 grammes. The dose is a teaspoonful in a fourth of a glass of water. It is recommended by good authority to dissolve the iodoform in ether, then mix the etherial solution with the powdered charcoal thoroughly. This insures an even distribution of the iodoform with the charcoal. After the ether evaporates the powder will be dry, then the other articles may be added and triturated together. This compound is more likely to reach the intestines in a condition to afford active disinfection of their contents. It may be repeated every two or three hours. Salicylate of bismuth is highly recommended by some authorities for the same purpose, in doses of 20 to 40 grains, repeated every four hours.

MEDICAL BOARDS—GOOD STAR CHAMBERS.—Power granted by the statute of the State to a medical board virtually makes it a star chamber, because, as these laws now stand, all such boards are responsible to nobody and can do according to their pleasure, and their pleasure is more frequently of the order akin to

high-handed abuse of power, even when in the hands of otherwise fair-minded men.

The Illinois Board of Health has promulgated a new order, viz, that it will not recognize the diplomas of Colleges that graduate at any session more than 48 per cent. of their graduates. This has all the delightful features of a medical papacy, for which the so-called "regular" medical profession is so anxious to have established by law in this land of free States and free men. We congratulate the Illinois State Board of Health, and hope the Allopaths everywhere will say, Go ahead! But they won't; no, siree!

FAIRCHILD BROTHERS & FOSTER'S advertisement in this issue of the JOURNAL is well worth reading and some study, for it has a scientific phase and, withall, gives excellent suggestions to the practicing physician. We have used some of the digestive ferments manufactured by them, therefore speak by the book when we give an emphatic indorsement to all that is claimed for them by this enterprising house. A medical acquaintance remarked to us recently regarding the wonderful benefit his exhausted patients have derived from these ferments, which he has found so much superior to beef tea or the ordinary extracts of beef found in the drug stores. Regarding these extracts of beef, we heard a lady describe the cruel nausea and disgust she experienced during her late illness on attempting to swallow the stuff that was offered to her for nourishment.

Fairchild Bros. & Foster prepare the finest, most convenient, and best adapted artificial aids to the digestive powers of sick people that can be found in the drug stores. Besides this, they are of reasonable price, and easily used by any person who is capable of otherwise nursing sick persons.

VAN BUREN, OHIO, Sept. 10, 1886.

Messrs. Battle & Co., St. Louis, Mo.

GENTLEMEN—In the case of "Insomnia," which I reported to you in May last, and wherein it required 7 drachm doses (hourly, 1 drachm) to produce sleep by Bromidia bought at pharmacy in Findlay—it required but 1 drachm, repeated in *one* hour, to produce a good night's rest, of the sample bottle you sent me. I also use the Bromidia (Battle & Co.) with the best results in "cholera infantum," and in "hysteria." Am satisfied that the article bought at Findlay was "spurious."

GEO. SPRINGER, M. D.

ELIXIR OF YERBA SANTA, a vehicle for quinine, it being in itself tonic and slightly diuretic:

Yerba santa	6 ounces,
Orange peel	2 ounces,
Cinnamon	3 drachms,
Clove	3 drachms,
Cardamom seed	3 drachms,
Coriander seed	2 drachms,
Caraway seed	2 drachms,
Anise seed	2 drachms,
Red saunders	1 drachm,
Alcohol	8 ounces,
Water, q. s. or	8 pints,
Glycerine	1 pint,
Sugar	4 pounds.

Exhaust the drugs, powdered moderately fine, with the menstruum indicated, so as to obtain four pints of percolate. In it dissolve the sugar, and filter.

A practical pharmacist and druggist, who we regard the best posted man in his profession in this city, informs us that the elixir of yerba santa is undoubtedly the best vehicle to administer quinine in, extant, because it thoroughly disguises the taste, and helps the therapeutic action of the drug also.

TO THE ECLECTIC AND LIBERAL PHYSICIANS OF TENNESSEE.

You will see, by a circular addressed "To the Medical Profession of the State of Tennessee," the movement of the "Regulars" in this State. They are better organized at this time than ever before, and are going to make a strong fight for medical legislation. Our organization is not as strong as it should and can be, and unless we are stronger in our State Society the enforcement of any law that the legislature may pass will be entirely in the hands of the Regulars. We must have no medical legislation unless each school of medicine has a representative on the State Board. We must look to our interests, or sooner or later we will be snowed under.

Let every liberal physician in the State meet us next February. See your candidates for the legislature, and have those who are elected look to your interest as well as that of the Regulars. The above has been the plan of the Electics for the last ten years, and

has always worked well. Send in your names for membership to our State Society as soon as you read this.

W. H. HALBERT, Lebanon, Tenn.

[THERE are three or four hundred liberal physicians in Tennessee, as far as we can learn. Many of them are men of talent and great ability, and in the front ranks as practitioners. There is every element needed to make a splendid State organizatton there. Men and brethren! why not?—EDITOR.]

TEXAS ECLECTICS TAKE NOTICE.

The Texas Eclectic Medical Association will meet in third annual session at Tyler, Smith County, Tex., on the second Tuesday in November, 1886. It is unnecessary to impress upon every Eclectic in the State the advantages that are gained, not only by himself but to the cause, by meeting and identifying with this Association—not only in valuable associations, but in everyday practice. Quite a number of excellent papers will be forthcoming. Special hotel rates and accommodations at the leading house will be obtained.

A. H. COLLINS, M. D., Secretary.

TREATMENT OF SCALP WOUNDS.—Dr. C. R. Park, of Chambers street Hospital, New York, proceeds as follows: Cleanse the wound and hair of blood and dirt with a douche of hydromapthal solution; next, cut close the hair with scissors for an inch around the margin, then closely shave; cleanse again with the solution; remove all clots, etc.; examine for fracture; none found, proceed to the dressing thus: Insert ten or twelve horse hairs through bottom of wound, the ends projecting from either corner three-fourths of an inch; bring the edges of the wound together and sew with catgut sutures the approximated edges properly adjusted; wash again with solution; lightly dust iodoform powder over the line of sutures, upon which apply a few layers of iodoform gauze; over this apply a large compress of absorbent guaze, the whole being held in place by a bandage the style of which depends on the location of lesion. This dressing is not disturbed for two or three days, provided no pain or unlooked for symptoms appear. In two days primary union will take place along the line of sutures, except where the horse-hair drainage project. The wound has been converted from an open scalp wound into a perfectly drained sinus. All but three o

four of the horse hairs are removed; the sinus is irrigated with the solution, and redressed as before. In two or three days more the sinus is so narrowed down that the remaining horse hairscan be removed; complete healing can occur under the dressing—the sutures are absorbed and give rise to no trouble, while the wound heals with little or no scar as compared with the plan of allowing the wound to heal by granulations from the bottom, and heals in a much shorter time.—(Abstracted from Chicago Medical Times.)

PUERPERAL CONVULSIONS.—Dr. F. C. Baxter writes (in the Chicago Medical Times): We have two pathological conditions to meet. The first is active congestion of the nerve centres, indicated by contracted pupils, and active spasm. To combat these, he prescribes from ½ to 2 drachms (according to the severity of the case) of tincture of gelsemium every fifteen or thirty minutes; Norwood's tincture of verat. var. is added in proper doses, though he recommends equal quantities with the gelsamium. Rather heroic doses; yet the combination is valuable in proper portions—say 4 of gelsemium to 1 verat. We can vouch for this. The feet are to be bathed in hot mustard water, and cold applied to the head. The second condition is, that of passive congestion of the nerve centres, indicated by dilated pupils, active spasms and coma, or coma with slight spasmodic action, or a great tendency to coma between spasms. He combats these conditions by prescribing from ½ to 2 drachms of compound tincture of lobelia and capsicum every fifteen or thirty minutes until relieved, with warmth to body and cloths wrung out of *hot* water applied to the head, also drachm-doses of ergot every hour after child is born, combined with broken doses of aconite rad. A rectal injection, containing 2 drachms of comp. tr. of lobelia and capsicum to a pint of salt water, to move the bowels. If the attack occurs during labor, chloroform the woman and deliver as rapidly as may be, and treat as above.

The above is old-fashion Eclectric practice; its success recommends it. It has never been improved upon. Recently hypodermic injections of pilocarpin has found great favor with Allopaths in the treatment of this disease; but its record is not flattering. In the adynamic form of puerperal convulsions, no remedy or treatment is extant that equals in success the use of compound tincture of lobelia, as set forth above.

BELLADONNA is a valuable corrective of all medicaments that have a tendency to depress the heart. Combined with chloral the hypnotic effects of the drug seem increased, and a smaller dose may be given, while the belladonna tones the heart and stimulates the ganglia. In minute doses, belladonna increases the reflex functionation of the sympathetic, yet it soothes the motor ganglia of the gray tract of the cerebo-spinal axis. In chorea, belladonna, in combination with macrotis, holds a high place in its treatment. We have nothing equal to belladonna to promote the cologogue and tonic action of podophyllin. The range of this combination is almost unlimited, if doses are carefully gauged and proportioned. The physiological therapeutic properties of belladonna are nearly opposite to that of chloral. When the latter is given in cases of low vascular tension—for it is often of service even in weak heart—adding belladonna to the dose of chloral gives us all the benefits of the former, as a hypnotic, and prevents to a great degree its depressing influence. While hydrate of chloral depresses the reflex powers of the spinal centres, belladonna soothes and tones these centres, and thus relieves reflex agitations. Belladonna combined with the bromides have a great powder to increase their action on reflex centres at the same time diminishes their deleterious impressions on the heart and sympathetic parts.

COCAINE IN THE TREATMENT OF GONORRHÆAL OPTHALMIA.—The Therapeutic Gazette excerpts from the Indian Medical Journal the method of Mr. A. Leahy of treating this formidable disease: R. Atropine sulph., ½ grain; cocaine sulph, 4 grains; vasceline, 100 grains. Mix thoroughly. Introduce a portion of this under the upper lids. After three days' treatment, the bad symptoms nearly entirely disappear. Cocaine is a powerful vasomotor constrictor as well as a local sedative to the protoplasmic elements of tissue, while atropine is a powerful sedator of nerve ganglia and perhaps endings.

PYRIDINE IN ASTHMA.—Dr. Neff claims it as being near a specific; that it acts promptly, and cures the worst form of cases.

MANNACA is a very sure remedy in muscular rheumatism, in doses of 10 to 40 drops of the fluid extract, repeated every hour,

SYZYGIUM JAMBOLANUM IN GLYCOSURIA.—Dr. C. C. Kingsbery writes to the Medical Age of a case of glycosuria successfully treated by him. The patient was a female, æt. fifty-four. She had been treated for two years or longer by various physicians for kidney disease, previous to becoming his patient. Himself failing with other remedies common to the treatment of this disease, he then prepared for her an infusion, using one-fourth of an ounce of syzygium to one pint of water; dose, teaspoonful three times a day, and gradualiy increasing to two tablespoonfuls four times a day. This case mended rapidly and on to convalescence. No restrictions as to diet were imposed; the patient was recommended to eat such articles of food as seemed to agree best with her. We have seen like reports of two other physicians in other journals that have evaded our memory. However, the reports of the value of syzygium jambolarum in diabetes mellilus are apparently encouraging.

FISSUE OF THE ANUS.—Iodoform, boric acid, equal parts, reduced to an impalpable powder. This is an essential item to success. Clean the fissure well with warm borax water; dry the parts thoroughly and pack the fissure full of the powder. Open the patient's bowels with enemas every day; avoid purgatives. Repeat the packing as often as necessary. Soon granulation will appear; the cure is made.

BORAX IN EPILEPSY is worthy of trial. Dr. C. T. Wilbur writes to the Medical Age that he has succeeded in two cases with this medicament; however, in others it has failed. This is no more than usual with all other remedies. Borax may cure cases that the bromides fail in. The dose may be 10 to 15 to 20 grains, three times a day, after each meal.

A GOOD BLOOD TONIC.—Make a neutral solution of ammonia carb. and acetic acid; be sure it is neutral. Mix equal parts of this and muriated tincture of iron. To 3 fluid ounces of the above mixture add 2 fl. ounces of fl. hydrastis, and 1 fluid ounce of tincture of nux; glycerine q. s. to make 8 fluid ounces. Dose, a teaspoonful three times a day.

SULPHATE OF MAGNESIA, in small doses of 10 to 15 grains, is a powerful astringent to the kidneys.

FOR NURSING SORE MOUTH.—The Chicago Medical Times says that the following is as near a specific as quinine is for ague.: R. Whiteoak bark, yellow dock root; tag alder, aa ʒ ss.; boiling water, O i. Make an infusion. Take a teaspoonful every two or three hours.

THE COLLEGE opened with a large class, as was anticipated. We are now busily engaged in the dissecting-room over the intricacies of practical anatomy. The *morale* of the Students is certainly of a superior order, evincing high culture and training. Still the numbers augment, new ones coming in every day.

TO ABORT A BUBO.—R. Tincture aconite; tincture veratrum var.; tincture capsicum, aa; to each fluid ounce add salicylic acid 60 grains; castor oil, 40 drops. Rub on the tumor several times a day.

CIDER VINEGAR is a good medicament, in drachm-doses, for simple diarrhœa. This is one of Dr. Beach's good things.

BOOK NOTICES.

Psychiatry; a Clinical Treatise on Diseases of the Fore-brain, based upon a study of its Functions and Nutrition. By Theodore Meynert, M. D., Professor of Nervous Diseases, and Chief of the Psychiatric Clinic of Vienna. Translated, under the authority of the author, by B. Sachs, M. D., Instructor in Diseases of the Mind and Nervous system, etc. Part II. The Anatomy, Physiology and Chemistry of the Brain. New York and London: G. P. Putnam's Sons. 1886. This work is a remarkable contribution to medical science. The thorough and exhaustive investigations of the author in this field of study enhances its value even to the average medical man. The first chapter treats on the structure and architecture of the brain; the second, on the minute anatomy of the brain. It is enough to say that these subjects are so clearly and exhaustively treated that nothing better can be desired. The third treats on the anatomical corollaries and physiology of cerebral architecture, in which structure is used to explain function and bring out the intrinsic relations of mental activities and their relation to the outer world. Pathological conditions and certain phenomena regarding the action of the cerebral cortex in relation to change of

structure and cell-life are largely dwelled upon. We have been deeply impressed by the profound philosophic reasoning and the interpretation of cerebral activity presented by the author in this valuable book, and recommend the study of it.

Guide to the Examination of the Urine, with special reference to the Diseases of the Urinary Apparatus. By K. B. Hoffman and R. Ultzmann. Second edition. Translated and edited by F. Frochheimer, M. D. With illustrations. Cincinnati: Woodruff, Cox & Co., publishers, 72 West Fourth street. 1886. 251 pp. Price, $1.50. We judge this book after two readings, and can, therefore, speak understandingly of its merits. Though not a ponderous tome, yet it is an excellent text-book and deserves the patronage of medical students. A liberal knowledge of the urine in health and disease is certainly of intrinsic value to the medical man, and he who is best posted in this department of practical science will, other things being equal, be the most successful physician. You must learn how to manipulate and understand the signs of disease the urine affords. In this little book we have one of the best guides to diagnosing disease, and the completeness of the information and clearness in which all the facts are arranged make it valuable, because the student is saved a great deal of prolix reading. Commencing with histology of the kidneys, and the pathology of the secretion of urine, the authors go on to discussing the normal and abnormal constituents of urine. Tests and reactions, and methods of manipulations are concisely given. The last fifty-four pages are devoted to applying the preceding teachings to practical use in the treatment of patients,—a very valuable feature you will admit. It is the best small book on examination of the urine we know of.

Journal of the Texas Eclectic Medical Association, Second Annual Session, held at Waco, Texas, November 10, 1886. A. H. Collins, M. D., Secretary and Editor of its publication. This is a neat and well-filled report of the proceedings and papers read at the last State meeting of the Eclectic physicians of Texas, containing sixty-five pages. The contributors and their contributions are: "Hæmorrhagic or Swamp Fever, Hæmaturia, etc.," by J. R. Johnson, M.D., Cottongin, Texas; "Hæmorrhagic Malarial Fever," by E. C. Rothrock, M.D., Richland, Texas; "Postpartum Atony and Subinvolution of the Uterus," by same

author; "Materia Medica," by same author; "A Case of Obstetrics," by D. J. Thomas, M.D., Savoy, Texas; "Reminiscences of a few interesting Cases of Parturitions," by M. W. Henry, Waelder, Texas; "A Few Thoughts upon the History, Progress and Practice of the Eclectic School of Medicine," by A. H. Collins, M.D., Honey Grove, Texas; "Cimicifugia Racemosa," by T. E. Cranfill, M. D., Turnersville, Texas; "Two Cases of Complicated Labor occuring with the same woman less than twelve months apart," by J. E. A. Ball, M.D., Davis, Texas; "Texas News and Items," by the Editor. We congratulate the Eclectics of Texas on the neat and able volume of transactions they have presented the profession.

A Compend of Pharmacy. By F. E. Stewart, M. D., Ph. G., Quiz Master in Chemistry and Theoretical Pharmacy in the Philadelphia College or Pharmacy; Demonstrator and Lecturer on Pharmacology in the Medico-Chirurgical College, and in the Woman's College, Philadelphia. 12mo, 196 pages. We call attention to this little book as being No. 11 of the Quiz-Compend series. All of the books of this series have been prepared with much care and are justly held as being far above the average compends. This Compend of Pharmacy is based, by special permission, on Prof. Joseph P. Remington's "Text book of Pharmacy," which is now the acknowledged standard authority. The author and publishers have given much time towards making it as complete and concise as possible, and in arranging the types and paragraphs so that it may be easily and quickly referred to. It will be found a useful guide to the tyro and worker in pharmacy. Price, $1. Philadelphia: P. Blakiston, Son & Co. 1886.

Quiz-Compend of Human Physiology; especially adapted for the use of medical students. By Albert P. Burbaker, M. D., Demonstrator of Physiology in Jefferson Medical College. Third edition. P. Blakiston, Son & Co., Philadelphia. The popularity of this little book is attested by the third edition (enlarged and improved) appearing. It is a good reminder.

The Student's Manual of Venerial Diseases; being a concise description of those affections and of their treatment. By Berkeley Hill, M. D., Professor of Clinical Surgical Union College, London, etc., and Arthur Cooper, M. D., Surgeon to Westminster

General Dispensary, London. Fourth and revised edition. Philadelphia: P. Blackiston, Son & Co., 1012 Walnut street. 1886. This is a condensed and at the same time very clearly presented statement of the leading facts regarding venerial diseases and their treatment. We have read the book, and from this standpoint recommend it.

Illusions of the Senses, and other Essays. By Richard A. Proctor. Price, 15 cents by mail. J. Fitzgerald, publisher, 108 Chambers street, New York. Here is a collection of essays by that most versatile of the popular expositors of science. The essays upon psychological subjects—the problems of mind—are specially interesting and valuable; but those upon other subjects are hardly inferior in interest.

THE DELAY OF THE JOURNAL the last two months has been owing to causes entirely beyond our control. We are full of profound sorrow that it has occurred, and would gladly lose one hundred dollars than have had it be as it has been. The printer must take his share of the blame. If anything on this green earth comes near achieving the uncoveted state theologians term total depravity, that thing is called "Printer." But we can't live without them, so they are billed as *the* useful evil. The publishers say they are too sorry to say anything, and we must mop up their weeping eyes, and let them suck their thumbs in peace; but they will be upon the printers next time. The editor is the only one of the whole *posse* that is full of fight, and had you heard him cuss the printer and his devil you would surely have thought that an earthquake bigger than the Charleston kind was coming to Atlanta. But we have made friends now, and all is lovely. The October number will soon follow, then we will catch up. We beg our dear friends—and we have heaps of true friends to be sure—to forgive the past, and overlook and forget. It shan't occur again, as long as we can keep on the sunny side of the printer and give his devil a piece of candy, or a quid of tobacco.

EUCALYPTUS AND JABORANDI IN PSEUDO MEMBRANOUS CROUP. —Two cases of this disease in children are reported successfully treated by the above medicaments combined, by Dr. J. P. Lytle, in the Eclectic Medical Journal. Five drops of the tinct. of each every half hour until phyalim and profuse perspiration were produced. The air of the room where the patient laid

was kept saturated with the steam of diluted vinegar. As soon as the constitutional effects of the medicaments were produced improvement commenced and continued uninterruptedly until convalescence. In the other case tablets of the medicament were used. The child coughed up tubular casts of the bronchi from one to one and a half inches long. The room was kept at a temperature 75° to 80° F., and the air kept saturated with vapor from slacked lime. Result, successful. This treatment was recommended several years ago by Dr. M. L. Doom, in same journal, who claimed he could cure 90 per cent. of all such cases. Dr. Lytle has great confidence in this treatment.

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ORIGINAL COMMUNICATIONS.

SOME PRACTICAL POINTS IN PRACTICE.

Mistakes made during the first week of acute diseases can seldom be remedied. Seventy-five per cent. of the fatal cases of acute croupous pneumonia die during the first week, and 50 per cent. of the fatal cases of typhoid fever die during the latter part of the second week. The high temperature is longer and slower in reaching its maximum point in typhoid fever in the majority of cases that recover. In acute pneumonia highest temperature is developed before the fifth day, and those that develop high temperature on the third day are the most serious cases we have. Remedies that sedate the vaso-motors without affecting the systolic energies of the heart are certainly the most rational and physiological to use in the outset of these acute diseases. Clinical experience has well attested the fact, that veratrum viride does sedate vaso-motor tension without inhibiting the vagus. This remedy, in broken doses, relaxes vaso-motor tension, and thus takes off the heavy pressure on the heart. In acute croupous pneumonia there is a heavy vaso-motor stimulation of all the rest of the system, while a vaso-motor pæresis exists in and around the inflamed area. Verat. vir. relieves the vaso-motor tension, relaxes the contracted arteries, and thus sluices off the blood from the inflamed areas into the splanchnic territories and to the skin, affording relief to the heart; its frequency falls and its force is undiminished, if anything increased. This is practically husbanding the energies of the heart, to enable it to hold out during the seige ahead. Ipecac and lobelia act very nearly like verat. in small doses, on the vaso-motors.

During the first stage of acute diseases, treatment founded on the above principles is rational and physiological. In the second

stage—that in which the circulatory centres are becoming exhausted—verat. vir. is not desirable; on the other hand, we find belladonna and strychnine potent remedies—the former wards off the inhibitory influence of the vagus on the heart; it also stimulates the involuntary muscles, an important advantage in asthenic diseases when exhaustion creeps along the line of the sympathetic system and exhausts involuntary muscular fibre. In this stage of acute disease there is slowly established a pæresis of the vascular system; the small arteries are overexpanded, the capillaries are full, the venous system is full; there is a marked increased pressure in the right auricle, and the right ventricle imperfectly empties itself; hence, we find the balance in the circulation in the lungs is being lost, the pressure between the pulmonary artery and the pulmonary vein is disturbed, blood flows from the lungs to the left auricle more slowly, and soon we find the balance between the heart and the lungs is being lost also; then commences the term when hypostatic congestions are wont to be established. The question of therapeutics is important here. What can be done to avoid all these dangers?

There is a strong belief among Eclectics, and well founded, that proper therapeutical management of this period will shorten the duration of the diseases, a most important point for consideration. Our belief in anti-zymotic remedies, peculiarly free from injurious qualities (altogether unlike carbolic acid, salicytic acid, etc.), and whilst antidoting zymo poisons in away quite the reverse of those, is a valuable part of our practice. Our studies of the physiological indications for remedies is a point of vast importance, and we have made this point emphatically. Baptisia tincture, eucalyptols gloub., myrrh., myrica cerifera—these are noted for their decided anti-zymotic properties. Baptisia is a strong vaso-motor stimulator, and, as some have shown, it, in small doses, causes a decided contraction of the splanchnic areas as well as being antiseptic. Myrica cerifera is noted for its anti-zymotic properties, in small doses, and, like ergot, causes contraction of the splanchnic and other vascular areas. It must be never lost sight of that, in acute diseases, during the periods of depression and exhaustion, the splanchnic vascular areas become like a vast sluggish lake into which a slow stream empties on one side, the lake acting as a break to the sluggish stream. It is the pæresis of these large vascular areas, which, as it were, swallows up the largest part of the blood, checks its current, helps to make it venous, and breaks the balance of the circulation.

Absorption of nutrients from the alimentary canal cannot go on to any degree of swiftness to benefit the system so long as these splanchnic vascular areas are so full of blood; hence we are able to explain the remarkable benefit so often derived from nux, belladonna, baptisia, myrica, ergot, calabar bean, etc., and as soon as the vascular pressure can be increased through vasomotor stimulation, the heart becomes stronger and slower, the respiration slower and fuller, hypostatic congestions fade away and absorption of nutrients from the alimentary canal is quickened.

We can see at a glance, therefore, how seriously wrong are those so-called "advanced" Allopaths who advise repeated doses of calomel in typhoid fever, supposing that it antisepts the intestines and kills germs. The use of large (so-called antip"retic) doses of quinine, in both pneumonia and typhoid fever, weaken the heart. Heavy stimulation too early in the disease is sure to bring on exhaustion at last.

In acute diseases, as is well known, the blood is not only being hourly impoverished, but is, as well, continually being poisoned. The best alternative left us in this class of disease is to keep the blood replenished with nutritive material. Seeing how deeply depressed are all the functions of life under this reign of depression, and how slow both assimilation, as well as digestion, become, our aim must be to prepare food in such a way as to bring it as near a natural and physiological condition for immediate absorption and assimilation, sparing the flickering energies of the system all tasks that draw on the little life that is left; hence we find by experience how valuable is peptized milk, malted paps, pancratized food and oils.

In acute disease the fats, glycogen, and the stored albuminoids, in common with the potoplasmic constituents of tissue, are savagely consumed and oxydized. Attention to the importance of supplying fats in acute disease is nearly wholly neglected. Milk, it is true, contains fat, but, then, the power to appropriate fat lays in the energy of the duodenum and the pancreas, both of which, in common with other organs, are, in acute disease, greatly lowered in functionation. Many a patient in passing through a typhoid fever, a pneumonia, or other acute protracted heat disease, dies from starvation, owing to the utter exhaustion of fat from the blood and the tissues. Under these conditions the system is unable to prepare fat for absorption. The alvine dejec-

tions of these patients contain a large share of the fat taken in their food, manifestly from the functional inefficiency of the pancreas and duodenum. Introduction of properly pancreatized fat into the system of these patients is a matter of prime importance, and every physician should know how to prepare such food. The ferment of the pancreas cannot, so far as we know, be isolated with the security that is effected with pepsin, and all pancreatic preparations deteriorate too rapidly to be worthy of any confidence when presented to us by the manufaciuring pharmacist.

Feeding fever and pneumonic patients is really a science that is not enough cultivated by doctors, and too much is left to nurses. We saved a life last Winter by feeding a patient who was hanging at Death's door for forty-eight hours, by feeding the pancreatic juice that was obtained by macerating a chopped pancreas in a solution of glycerine, water and bi-carbonate of soda. This juice was added to milk and to melted butter, and some beef's suet. The effect was something never to be forgot·en. In twenty-four hours life was leased anew, and it was as though one had rose from the dead!

The proper treatment of acute disease is a scientific labor which the medical mind must study anew. Doctors must get rid of many of their heathenish notions before medicine will become a science.

MEDICAL SKEPTICISM.

"IS MEDICINE A HUMBUG?"

BY J. H. HAND, M. D.,
Professor of Materia Medica and Therapeutics.

"I am tired of the science of Guessing" was the expression of Dr. Waterhouse, after having been engaged in the practice for twenty years.

That most physicians, after a few years' practice, do become skeptical as to the restorative power of drugs, and doubt the claims of the profession as to the great benefits conferred upon suffering humanity, is generally recognized by close observers. That the masses of the people have more confidence in medicine than the profession, is equally patent.

The object of this inquiry is to seek the cause of this state of mind—the confidence on the part of the masses, and the skepticism on the part of the profession. First, then, on the part of

the masses, they have observed the modifications of the symptoms of disease that follow the administration of many medicines. Favorable modifications are always claimed by the physician as the proper effects of the prescription, and the people gratefully concede it, while, on the other hand, unfavorable symptoms are chargeable to the progress of the disease, being ignorant of the natural order of symptoms, and of the order of the occurrence of the symptoms tending to recovery; and, again, it is difficult for them to believe that nineteen-twentieths of the attacks of disease, left to Nature, would terminate favorably.

The claim that the most illiterate have the most implicit faith in medicine, should not be construed as evidence against the utility of medicine; nor would it be just to accept the skepticism of the learned theorist or the theoretical scientist, as evidence against the utility of medicine.

That the Materia Medica in the present state of knowledge is not capable of being reduced to an exact science, we freely admit; and that Therapeutics at present cannot be demonstrated an exact science we are forced to concede; but shall these facts be accepted as sufficient reason for denouncing Medicine as a "humbug?" It should be remembered that the discovery of the physiological action and therapeutic uses have been made through patient and accurate observation; that the facts have been clinically and not theoretically ascertained; that many conclusions in regard to the therapeutic application of remedies on insufficient observation and evidence, does not disprove the facts. Rheubarb, podophyllin and mercury act upon the gastro-intestinal mucous membrane, causing the evacuation of the morbid contents of the intestinal canal; nor that twenty or thirty other articles of the materia medica will cause emesis.

Will the skeptic watch a patient anæsthetized with chloroform or ether, undergoing amputation of the arm or leg, and then pronounce these medicines "humbugs?" Do not morphia, the bromides, and valerian soothe the suffering and tortured invalid to quiet rest? or that the despondent, weary and haggard invalid from malarial infection is not benefitted by the restoration of health with iron and quinine? When the vital force, the blood and tissues, of the body are being consumed by the disturbance of the natural forces of living bodies by the supremacy of chemical laws over the vital, as manifested by fever and inflammation; when the skin is parched, the pulse bounding, and every nerve

is tense and thrilled with notes of warning, will you look on and tell me, then, that gelsemium, aconite, veratrum, and lobelia are "humbugs?" You will not. Ignorance of disease, as well as want of accurate observation. is a prolific source of skepticism in medicine.

An incorrect interpretation has led to erroneous diagnosis. If we base our prescription upon symptoms, without knowing the alterations both functional and organic that have occurred within, it is certainly only the science of guessing, and the word "humbug" would be more applicable to the physician than to the drug.

It is conceded that a thorough knowledge of physiology must be obtained before pathological conditions can be clearly understood; but it is maintained that, when pathological alterations in functions and organs are clearly comprehended, and the properties of medical agents are fully known, then, and not until then, will medicine be ranked as an exact science.

That this subject is environed with many perplexing difficulties is true, because we necessarily have to study the relations between invisible forces and tangible substances. We know the functions of organs, but we do not understand the polar relations of the cells that constitute the organs and adapt them to the maintenance of the physiological play of invisible forces—motor, sensory, and semi-conscious—known as vital forces. In these circumstances lie the difficulties to the rapid progress of medical science. These mysteries cannot be revealed by the crucible, the scalpel or the microscope, but pure reason or the intuitions of intelligence will make them plain. Then will the scoffing of the skeptic cease.

ÆSCULUS HIPPOCASTANUM—HORSE CHESTNUT.

[EXCERPT FROM "GOSS' MATERIA MEDICA."]

Through the cerebro-spinal centre, the æsculus has one special centre of action, viz, upon the colon, rectum, and anus. In constipation, with hard, knotty stools, with backache, this remedy, with cascara, may be given with confidence. In prolapsus of the rectum, small doses, alternated with currents of electricity, will be found to act with promptness and certainty. It doubtlessly improves the general circulation of the portal system, but more especially that of the pelvic region, the rectum and anus. It is indicated in all cases where there is atony in the vessels, giv

ing rise to stasis of the pelvic circulation, and then to local congestion, and finally to piles. It acts much like its congener, the Æsculus glabra—the Ohio buckeye. The tincture of the nuts of either may be used, in doses to suit the age of the patient, say from 3 to 5 gtts. three or four times a day. In case of excessive menses, where the uterus is enlarged, and the cervix tumid, this article, given in doses of 3 to 5 gtts., or the Æsculus hippocastanum in 10 to 15 gtts., three times a day, will succeed in the relief of this condition. It has proven valuable in some cases of paralysis of the lower extremities, and should be well investigated.

Therapeutic Indications.—This article is especially indicated in cases of portal congestion, and in cases of hemorrhoids. If the hemorrhoids are internal it is indicated by severe pain in the sacrolumbar region. In cases where hemorrhoidal tumors are large and do not bleed, but are very painful, then this will be found to be a very valuable remedy, in doses of 3 to 5 gtts. of the normal tincture of the crushed seed. Excessive dryness of the rectum and anus, with a feeling as if some sharp substance was lodged in the rectum, indicates this remedy. If the tumors are of a bluish color, and protrude from the rectum, attended with sharp, shooting or cutting, burning pains, hippocastanum is the indicated remedy. Here, in addition to the internal use of the tincture, the ointment may be alternated with the ointment of persulphate of iron. Its action upon the portal system renders it a valuable remedy in jaundice from portal congestion. It is also indicated in leucorrhœa, with pain in the sacro-iliac articulations, with great lameness in the back and fatigue from walking.

PREVENTION OF THREATENED MAMMARY ABSCESS IN PARTURIENT WOMEN.—Dr. Philips Maill, in British Medical Journal, says he has seen a hot, heavy inflamed breast, with readness of skin, throbbing with deep seated pain, and pulse of 120 disappear in a few hours under the following treatment: Dissolve 1 ounce of carbonate of ammonia in a pint of boiling water; when solution is effected the heat will be scarcely too high for fermentation with woolen cloths dipped in the liquid. This must be assiduously applied for half an hour at least, and repeated two or three hours later as necessary. Relief is immediate and more than three applications are seldom needed. The nipple may be protected, but he has never seen them injured by the applications even when unshielded.

ABSTRACTS.

THE NEW HYPNOTICS.

In a clear and concise paper, Professor Dujardin-Beaumetz (Therapeutic Gazette) first defines what class of remedies should be classed as hypnotics. Morphine and opium do not belong to this category, inasmuch as they cause cerebral congestion, while in true sleep cerebral anæmia obtains. They act beneficially, however, in all cases of insomnia brought on by pain; they belong rather to the class of analgesics and stimulants than to the hypnotics. Chloral and paraldehyde are true hypnotics; they act by bringing about that condition of the brain which obtains in physiological sleep. Chloral, in the author's opinion, does not act by being split up into formic acid and chloroform, but it acts directly on the nervous elements of the brain. The experiments the author performed some years ago fully decide this question. He injected 45 grains of chloral under the skin of a hare; the animal almost immediately fell into a state of anæsthesia, absolutely similar to that caused by chloroform, and this condition lasted until the chloral ceased to be eliminated by the lungs and urine unchanged. The speedy total anæsthesia could not be explained if the theory is adopted of the breaking up of chloral into formic acid and chloroform, for this decomposition is so slow, and the liberation of chloroform so feeble, that anything like a profound anæsthesia could not be produced by such doses. The depressing effect of chloral on the heart and its irritant effects on the stomach must be prominently kept in view. Hence chloral should be interdicted to all persons suffering from cardiac affections, and in particular to those who have aortic stenosis or insufficiency. It should also not be given to patients affected with stomach disorders, nor in diseases of the larynx and pharynx, by reason of the burning sensation in the back of the throat that attends the swallowing of the chloral potion. Paraldelyde exists in two forms—the one liquid at 0° C., the other solid at 10° C. It is to this last alone that the name of pure paraldehyde belongs. This pure paraldehyde is soluble in alcohol and water, one in two parts.

A good formula for administering it is paraldehyde ʒ iij, water ʒ vj; ʒ ss of this is given at a dose, and, as it has rather a disagreeable odor, it is best given in alcoholic liquors, especially in

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The value of an efficient preparation of pepsine is well understood in indigestion and in the complication of disorders resulting therefrom; also, as an adjunct to the treatment of diseases in which are required the continued use of remedies which derange the digestion and destroy the appetite.

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A teaspoonful just before or after food will be found to aid digestion and assimilation; also, recommended at any time when sufferi g from indigestion. In the occasional distressing attacks to which chronic dyspeptics are subject, a few doses will afford the most happy relief.

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FOR SALE BY ALL DRUGGISTS.

Feb.84-1y.

rum. The following formula makes a pleasant elixir: R. Paraldehyde, ʒ ijss; alcohol, ʒ iss; tincture of vanilla, ʒ ss; water, ʒ i; simple syrup, ʒ ij. Dose, ʒ ss (grains 15). It may be administered in enemata with the yolk of an egg, and it is said that the active dose by enema is one-half less than by the mouth. It has also been employed hypodermically, which method, though quite safe, is very painful.

Experiments on the lower animals show it to affect successively the cerebrum, spinal cord and bulbus, producing complete anæsthesia and loss of all the reflexes. It is a true hypnotic, causing sleep by anæmiating the cerebro-spinal axis. Its elimination takes place almost exclusively by the lungs, a fact which is explained by its extreme volatility. A peculiar feature of this drug is its antagonism to strychnine. Dujardin-Beaumetz has confirmed the results of Italian experiments on this point. In one of two hares he injected into the subcutaneous cellular tissue ʒ ss of paraldehyde; the other received none. In the latter 1·60 of a grain of strychnine was injected under the skin; the animal immediately fell into tetanic convulsions and shortly succumbed; 1-12 of a grain of strychnine was injected in the hare dosed with the paraldehyde, and the animal survived.

Compared with chloral, paraldehyde has the following advantages over it: (1) It is less irritating, and hence better tolerated by stomach and pharynx; (2) it is not a cardiac poison; (3) it works better in strychnine poisoning, but is less an analgesic. He considers it particularly beneficial in nervous insomnias and in those produced by the abuse of alcohol. Contrary to the statement of others, the author has not found that it loses its effect in patients on continued administration. He gave it in one case for months with benefit.—*N. Y. Med. Journal.*

CIRCUMCISION UNDER COCAINE—IMPROVED OPERATION.—Dr. E. R. Palmer, Professor of Physiology in the University of Louisville, writes to the Medical Record that, desiring to perform circumcision under cocaine, he determined to use Corning's method of sequestration.

"The patient, a young man, twenty years old, with a complete congenital phimosis, was seated in a chair, and the penis was seized by my assistant and drawn upon firmly. A Martin bandage, seven-eighths of an inch wide and a yards long, was next applied, the first turn being made behind the scrotum to

prevent slipping, and the bandage being then wound tightly back and forth from the symphysis pubis to the corona and back again. An ordinary hypodermic syringe was next filled with a 6 per cent. solution of cocaine, and the needle, directed toward the extremity of the penis, was passed at four different points through the skin over the glans, a fourth of the contents of the syringe being discharged each time into the subcutaneous tissue. No attempt was made to introduce the drug from the mucous surface. In about three minutes I began adjusting a Rogers' clamp, occupying as many more minutes in getting it placed to suit me and screwed down. The prepuce was removed with one stroke of a pair of long curved scissors, and the clamp removed. The dorsal artery was found not bleeding; the frænum was not cut. The mucous membrane was split up, and some eighteen sutures leisurely introduced. The bandage was now removed, and contrary to expectation, no hemorrhage ensued. Less than a drachm of blood was lost during the entire operation. The wound was dressed loosely with absorbent cotton wet with equal parts of listerine and water. Not a twitch of pain was felt after the last needle puncture had been made. The young man of nervous temperament, was at first quite pale, but later assisted in the stitching, and as he washed his hands after the operation remarked that his penis still felt dead. The wound healed in forty-eight hours by first intention.

"The advantages of the bandage are several: It wholly controls bleeding, it localizes the action of cocaine, and it increases the facility with which the penis can be handled during the operation. The reverse direction for application, that is from behind forward, will be found the best, because the easiest, and fully effectual."

Dr. Palmer adds that he performed the operation a second time in the same manner, with equally good results as regards anæsthesia. But the continuous suture was used, and although perfect coaptation was accomplished, some trouble was experienced later from swelling and from syphilitic induration of the parts. It was attempted to remove the suture, but this was found impossible, and the writer thinks it would have been better had interrupted sutures been employed. The case is now doing quite well, however, and the result will be good.—*Periscope.*

ANTIPYRIN AS AN ANALGESIC IN HEADACHE.—Dr. John Blake White, Physician to Charity Hospital, New York, sends the following to the Medical Record:

"The high road to truth is the knowledge of facts, and well is it for searches after truth when facts can be ascertained and carefully recorded.

"Symptoms are the alphabet, cases the language, of disease, and that physician subserves his profession who carefully records his experience.

"During the past two years I have abundantly tested the therapeutic value of the drug known as antipyrin in various forms of headache. The prompt relief obtained through its use compels me to accord to it a high rank among our medical resources. I have already called attention (Medical News, July 10, 1886,) to the potent antipyretic power possessed by this remedy in the management of various forms of fever, and have observed that after its administration the urgent symptom of headache, so uniformly present in these cases, was soon controlled.

"Antipyrin undoubtedly possesses brady-crote properties in a high degree, as the pulse is notably softened and moderate in frequency soon after a proper dose of it has been taken. It produces some somatic change favorable to a reduction of the pulse in cases of fever, and so exerts a calming influence upon the vaso-motor system. The capillaries, through its agency, doubtless dilate, and local congestions are dissipated, as the relieved patient usually sinks into a refreshing repose soon after its exhibition. In the course of a large experience with antipyrin I have found that, when administered in masterful doses, it not only promptly relieves the symptom of headache whenever present, whether resulting from disordered digestion, disturbance of the menstrual functions, loss of sleep, undue mental effort, or even that associated with dreaded uræmia, but also possesses reliable prophylactic virtues against recurrent attacks of cranial neuralgia. So confident am I of the power of this remedy to disappoint neuralgic headache when imminent, that I have instructed many patients, who are liable to such visitations, to keep in readiness and take a dose of antipyrin as soon as they have premonition of its recurrence, and all so far testify in favor of its efficacy.

"The value of this remedy in the above respect has not only

been tested in my hospital and private practice, but I also record the fact it has proved successful in the hands of professional friends, upon whom I had urged its employment for the relief of neuralgic affections of the head and face. I have been singularly impressed with the promptness of relief which often followed the administration of even a single dose of 15 grs. of antipyrin. The grateful relief from headache usually ensues within half an hour after the drug is taken. A sense of drowsiness ordinarily supervenes, followed by a brief but sufficient slumber, and the patient awakens quite relieved of this distressing symptom. I have never yet seen the sleep-disposing properties of antipyrin alluded to by any other observer, although this effect seldom fails to ensue when a full dose, such as I have named, has been taken."—*Ibid.*

THE PHYSIOLOGICAL ACTION OF ANTIPYRIN AND KAIRIN.—In the Meditzinskoie Obozrenie, Fasc. xii., 1885, p. 1203, Dr. S. J. Pavlinoff (London Medical Record, March 15, 1886), of Moscow, describes the results of his experiments which have been carried out under Professor Morokhovetz's guidance, in order to compare chemical and physiological properties of antipyrin with those of kairin.

Chemical Properties.—The preparation of antipyrin was obtained from Ferrein, and represented an amorphous yellowish powder of pretty strong bitter taste, with aromatic flavor. It was soluble in water and ether; the solutions were neutral. Kairin belongs to light oxidizable substances; its solutions, kept in contact with the air, within twelve hours become of a ruby color, and in a few days rich dark cherry red. On the other hand, solutions of antipyrin remain unchanged (that is, either colorless or yellowish) for a month, or even longer. Being treated by nitric acid, kairin solutions turn to dark cherry-red, and, on being subsequently diluted, they gradually become yellow, the latter coloration occuring still even when only 0.001 per cent. of the drug is present. Antipyrin gives no reaction with the acid. But both kairin and antipyrin solutions assume a claret-red color on being treated by perchloride of iron $Fe_2 Cl_6$).

Physiological Action.—A. *Blood.*—As Morokhovetz showed, when mixed with an equal volume of a 0.001 per cent. solution of kairin, the blood assumes a claret-red color, and gives the methæmoglobin bands on the spectroscopic examination. The

red blood-corpuscles take a cup-like form and brownish color. But an anytipyrin remains entirely inactive, even when a 1 per cent. solution is employed The same difference between the two substances is observed, also, when intravenous injections of their solutions in dogs are undertaken. B. *Blood-pressure.*—Antipyrin induces an increase of the arterial tension, while the latter is rapidly and very considerably lowered by kairin (after a fleeting initial rise) C. *Pulse.*—Under antipyrin, the pulse becomes somewhat retarded, but its rythm remains regular; while under kairin it quickens and assumes a filiform character. Some experiments seem to point out that kairin affects the cardiac muscle, the cardiac nerve apparatus remaining intact. On the contrary, antipyrin appears to act on the latter, and to leave intact the former. D. *Respiration.*—Antipyrin produces a very considerable quickening of the respiration, the type of which, however, remains uniform all through. On the other hand, kairin brings about interrupted or irregular breathing. Therefore, as far as circulation and respiration are concerned, kairin and antipyrin are endowed with diametrically opposite actions. E. *Salivary Glands.*--Both of the drugs augment the secretion of saliva; antipyrin may be detected after a while in the latter, though in small quantities. E. *Pancreas.*—Neither antipyrin nor kairin has any influence on the secretion of pancreatic juice. G. *Liver.*—Kairin increases the secretion of bile, the color of which gradually turns to black, while antipyrin remains entirely inactive. H. *Kidneys.*—Neither of the drugs manifests any action on the quantity of urine. But the first portions of urine voided after the introduction of antipyrin contain a considerable quantity of the drug. Therefore antipyrin is eliminated from the system through the kidneys and salivary glands. I. *Motor Nerves.*—Dr. Pavlinoff confirms the statement of Morokhovetz that kairin, like curare, affects the intramuscular endings of the motor nerves (in frogs); the drug acts antagonistically to strychnine (as Professor F. P. Sheremetevsky supposed). Nothing of the kind is noted as regards antipyrin. J. *Reflex Action.*—Antipyrin increases the reflex action (as Professor Demme, of Berne, first proved). K. *Temperature.*—Antipyrin depresses the normal temperature, but not at any uniform rate, the latter varying from 0.5° to 2° C. and more; generally speaking, the depression is the more marked, the shorter the intervals between the doses administered. Under kairin, the temperature

sinks in consequence of the drug absorbing oxygen of the blood; hence the use of kairin in cases of pneumonia, chronic pulmonary disease, anæmia, cardiac disease, etc., is fraught with obvious and immediate danger. In all such cases, antipyrin may be safely and effectively administered, the drug being indifferent in its chemical behavior towards the blood, and, if anything, strengthening the cardiac action.—*Therapeutic Gazette.*

ERGOT IN THE TREATMENT OF DYSENTERY.—Dr. Du Rocher (in Prog. Med., March 6, 1886) relates the history of a severe case of dysentery in which, after four days of unsuccessful treatment with other remedies, ergot was ordered, 45 grains a day, in six doses. During the first day's use of the ergot there were only two decidedly diarrhœal passages, containing a little mucus, but not a trace of blood; the next day there was only one; on the third day the patient was cured. The author is inclined to think that ergot will prove a valuable drug in the treatment of dysentery.

THE TREATMENT OF WHOOPING-COUGH WITH CARBURETTED HYDROGEN.—Dr. W. T. Greene (Medical Press, April 7, 1886) believes that he has discovered a substitute for this method of treatment which will produce better results without the inconvenience of the former plan. He was led to this discovery from the fact that in one of his children, who was suffering from this disease in a severe form, after a day or two the symptoms gradually subsided and all trace of the whooping cough disappeared in about ten days from the commencement of the attack. The explanation which he gives of this cure is that at the head of the child's cot there was a gas-pipe from which a slight escape of gas had been noticed for sometime, but the workmen who had been sent for to repair the breach did not come, and so the gas continued in very small quantities to escape, and the little boy got rid of his whooping-cough in a marvellously short time. He repeated this mode of treatment in many other cases, and he claims always to have obtained the like gratifying result. His mode of administration is quite simple. A piece of ordinary gas-tubing is obtained of sufficient length to reach from one of the gas-burners to the floor, on which it may advantageously trail for a foot or two. The gas is then turned on sufficiently, just enough to make its odor perceptible, and the little patient allowed

to stand over and inhale it for a few moments, as often as convenient. It will not make him cough, but, on the contrary, afforded a grateful sense of relief, and after a few inhalations the more formidable symptoms of the disease will disappear, and will altogether cease to manifest themselves after a few days.—*Ib.*

[It is claimed that water gas contains much carbonic oxide which is a deadly poison to the blood, hence a distinction must be made so as not to substitute this kind of illuminating gas for that made from stone coal, or fatal results may occur.—ED.]

A SIMPLE METHOD OF ARTIFICIAL RESPIRATION.—The desideratum at which we aim in artificial respiration is to obtain a method of as simple character as possible, so that it may be readily understood by the laity, and at the same time should possess the maximum efficiency. The main indications in artificial respiration are: first, to loosen clothing, braces, etc., so as to allow free movement of the chest and prevent constriction of the neck; second, to bring the trachea, larynx, and pharynx as nearly as is anatomically possible into a straight line with the openings of the mouth and nose; third, to obtain as deep an inspiration as possible by elevating the ribs and depressing the diaphragm; and fourth, to get a deep expiration. Now, although the accepted modes of restoring respiration have proved very successful in trained hands, yet they are almost unknown to the general public, and all require a certain amount of skill, which cannot always be looked for at the hands of the laity. Mr. John Arthur Francis proposes, in the British Medical Journal, March 20, 1886, a plan which he believes combines all the advantages of the methods generally employed, besides possessing great simplicity. It is as follows: The body, having been laid on the back, and with the clothes loosened and the mouth and nose wiped out, two bystanders should pass a narrow lever of any kind under the body at the level of the waist, and raise it till the tips of the fingers and the toes of the subject alone touch the ground, count fifteen rapidly; then lower the body flat to the ground, and press the elbows to the sides hard; count fifteen again; then raise the body again for the same length of time; and so on, alternately rasing and lowering. The head, arms and legs are to be allowed to dangle down quite freely when the body is raised. A child can easily be manipulated by one person with a hand under each loin. For an adult, the best way is for two

persons to grasp each other's right hand under the body, and then raise it. A stout walking-stick or umbrella would be efficacious, where the operators were too weak to lift up the patient with one clasped hand. To join both left and right hands with those of another person would probably form too great a plain for the body to rest on, except in the case of a very tall patient, and prevent the full extension of the spine.—*Therapeutic Gazette.*

IODIDE OF POTASSIUM IN SPASMODIC ASTHMA.—DR. J. Ormond publishes in the Practitioner, April 10, 1886, a tabular analysis of the results obtained in thirty-six cases of asthma treated with iodide of potassium. All of the cases displayed, though with varying severity, the cardinal symptoms of the disease—that is, difficulty of breathing coming on suddenly, usually in the early morning during sleep, and passing off after a time, so as to leave the patient comparatively well, but recurring usually in a regular fashion at regular intervals. The iodide was given alone, or if in combination, only after the effect of the uncombined drug had been tried, and it proved a failure only in nine cases out of thirty-six, that is, in twenty-five per cent., while its good effects were not limited to the uncomplicated cases. Five or ten grains three times a day seemed to suit best in most cases, but in some a larger or smaller dose did better. In some, again, an increase of the dose did good for a time, but the effects seemed to wear off. In confirmed cases the drug can hardly be claimed to be curative, though it will in many relieve attacks, which, however, are apt to return when the use of the drug is stopped.—*Therapeutic Gazette.*

EUCALYPTUS AS A TOPICAL AGENT.—In the Cincinnati Medical News, April, 1886, Dr. P. T. Williams states that he was led to use eucalyptus as a topical application to the inflamed surface in cases of erysipelas by being told by an old sailor that he had been treated in that way by a physician in one of the East India Islands with most striking success. Dr. Williams reports three cases of erysipelas affecting the face and right leg, another the face, and another the scrotum, in which the application of the fluid extract of eucalyptus promptly arrested the itching and burning sensation, and the exudation of the peculiar gummy discharge.

In a case of the tibia, with extensive inflammation of the skin,

attended with the formation of numerous blebs and small ulcers, the happiest results followed upon the local use of the fluid extract of eucalyptus. In the cases of erysipelas it was applied, by means of a camel's hair brush, every four hours. In the case of disease of the tibia he employed it twice daily. In each case appropriate internal treatment was made use of.

Dr. Williams's experience with eucalyptus as a topical agent, of course, is too limited to base much of an estimate in regard to its value, but the seeming beneficial effects following in the few cases he has mentioned, together with the data already published on this subject in previous issues of the Gazette, encourage one to believe that it can often be used with advantage locally; that there can be obtained from it all the benefits that are to be had by the employment of the tincture of iodine, solutions of nitrate of silver, salts of iron, etc.; and that it can be made use of when these could not be in consequence of some objectionable features attending their application.—*Ibid.*

A NEW REMEDY FOR DIPHTHERIA—BICARBONATE OF POTASSIUM.—Dr. Malcolm Morse, Amissville, Va., in Virginia Medical Journal: Six hundred operations in diphtheria for tracheotomy and laryngotomy witnessed by Dr. Jacobi, of New York, and two hundred and sixty-one performed by him, render his recent monograph on this disease peculiarly interesting to the profession. A short summary of his treatment, which I will give at the end of his treatise, will probably be acceptable.

My plan is to alkalize the blood with bicarbonate of potassium rapidly as I can without disordering the stomach or interfering with digestion.

I try to keep the 2,381,248 sudoriferous glands (Krauss) at work to the fullest extent, taking care not to exhaust the patient by excessive diaphoresis, and to open the 7,000,000 pores (Wilson) by hot baths, sponging the body with a strong solution of bicarbonate of soda and hot water, in order to have these little safety-valves in good condition, to throw out as much of the *materies morbi* as possible. The soda removes the dead skin, oil globules, and general *debris* of the body, from the mouths of the perspiratory tubes.

One of the ablest English writers says that the greatest and most valuable improvements in medicine in recent years is the attention paid by intelligent physicians to the condition of the

skin. The experiments on himself by Sanctorius, kept up for twenty years, show that five-eighths of all the food and liquid which he consumed was thrown off by the skin and lungs, and only three-eighths by the bowels and kidneys. Working men in the gas-works, exposed to great heat, have frequently been known, according to Dr. Austin Flint, to lose from two to four pounds an hour.

Nature's method of cure, in a multitude of diseases, is to throw out the noxious particles contaminating the blood, and the morbid and poisonous germs, through the pores. Are we not all familiar with the effect of continued hot bathing in forcing mercurial and syphilitic poisons to the surface? These eruptions are unmistakably visible. Can we not, by reasoning from analogy, fairly conclude that, though invisible to our eyes, the diphtheretic virus is eliminated in a great measure by the perspiration produced by hot baths and sponging, and that it is of the utmost importance that the mouths of these millions of safety tubes and valves should be kept clear and open? It is well to remember that one of our best authorities states that an appreciable quantity of oxygen is absorbed by the skin (from 1-40 to 1-50) cutaneous respiration.

The temperature of the room should be from 63° to 76°—care being taken not to let the room get too cold about daybreak, at which time the nurses are apt to become sleepy and negligent. Nearly all our recent medical writers recommend that the room should be well steamed. This important auxiliary treatment is rarely done properly in the country, unless the physician attends to having it done himself.

I alkalize the blood by giving as large doses of bicarbonate of potassium, for twenty-four to thirty-six hours, as the stomach can easily tolerate, and then I gradually diminish the dose. For an adult, I give from 10 to 20 grains every two hours, day and night, and children in proportion to their age. Many cases have been treated by me, without a single fatal termination, by giving large doses of bicarbonate of soda. In some severe cases I have alternated the bicarbonates every hour.

My reason for using the bicarbonate of potassium was that it was less liable to produce gastric irritation than the carbonate of potassium, which I had seen highly recommended by some eminent German medical authority years ago, and because it is a diaphoretic.

The alkaline treatment was adopted, because blood-letting and mercurialization had equally failed to afford any favorable change in the character or duration of the disease. Jacobi, Roberts, Austin Flint, and other distinguished medical men, agree on this point. Bartholow says blood-letting, mercurialzation, emetics, nauseants, etc., are rationally contra indicated.

In the year 1862, in Rupert, Vermont, according to Jacobi, the death rate was ninety out of every hundred cases when treated by bleeding and calomel, and only ten deaths in a hundred when stimulants, iron, and chlorate of potassium were prescribed. This is rather a marked difference in results, and one worthy of the reflection of every true physician.

The list of so called remedies for this disease is long—most of them being inert in effecting any change in the blood, and a large class of them, when given, have not time to produce the specific action claimed for them, in a malady that is often fatal in twenty-four hours; while others, highly recommended, interfere with digestion—the very thing we wish to avoid.

Stimulants and liberal and proper nourishment are indicated almost from the beginning. Jacobi says: "The fear of bold administration of stimulants will vanish in this disease, as the fear of opium in peritonitis, quinine in pneumonia, iodide of potassium in meningitis." If the stomach is kept in good working order, and the stimulants and food judiciously administered, the chances are, unless the system is prostrated from the very beginning, that good, healthy blood will be made, which will take the place, at least in part, of the contaminated diphtheritic blood, and that the nerves will be strengthened and braced up by it.

It is now the generally received medical opinion that the throat must not be irritated with strong gargles or caustic applications. My custom has been to use topically mild solutions of chlorate of potassa, with the addition of a little of the tincture of the chloride of iron, or a simple solution of bicarbonate of soda, or carbolic acid in a very diluted state. "*Nemo me impune lacessit*" —No one injures me with impunity—should be the motto for a diphtheritic throat.

Dr. Flint recommends, for local treatment, carbolic acid, salicylic acid, permanganate of potassa, chloral hydrate, sulphate of soda, sulphate of iron and chlorate of potassa and carbolic acid. Of the last named medicine, he says: "For gargles, throat washes, and nasal injections, when required, I resort to solutions

of from ½ to 2 per cent." He advises no water to be given immediately after these medicines are applied. Dr. Flint says: "The application of a liquid may be made by means of a probang, a camel's-hair brush, or spray producer; the last is the preferable plan with children." The chlorate of potassa may be taken dry into the mouth, combined with pulverized sugar. Salicylic acid is conveniently applied in the form of a dry powder, combined with dry bismuth.

Iced champagne is one of the best stimulants for children. Sometimes, when they will refuse it in liquid form they will take it frozen. When it is opened, the champagne should be poured into a beer-bottle with tight India rubber cork, and put into a bucket of ice-water, or kept on the ice, in order that the carbonic acid may not escape.

Sometimes we have trouble in getting young patients to take the brandy regularly; in these cases, by mixing it with milk, or giving it in the shape of egg-nog or apple-toddy, or mixed with mint and sugar, or some aromatic bitters and sugar, we can get over this difficulty.

In severe cases, it is wonderful what a quantity of stimulants a child can take. They should be given very frequently at night. You can hardly give too much. The danger is not in over-stimulating, but in under-stimulating.

Strong nourishment is now given at the very beginning of the attack. On account of the swelling and tenderness of the throat, I very often have the beef-tea and milk frozen, and allow them to melt in the mouth. Young patients who refuse to take beef extract in the liquid form will take it in this way. Ice-cream is a valuable nourishment, and should be given often. I always try to render the medicine and food as agreeable as possible to the children, for sometimes, unless this is done, they will refuse to take anything.

It has been my practice, as soon as I am called in to attend the first case of diphtheria in a family, to recommend all the children in the house to be given a good dose of bicarbonate of potassa or bicarbonate of soda three or four times a day. I do not pretend to claim that it prevents them from having the disease; but, from close observation for sixteen years, I think it generally gets the blood in a condition which renders an attack of the malady less severe. Also, I endeavor to have the children either removed at once from the house, or kept out in the

open air as much as possible, and as far off, when in the house, as they can get from the patient's room.

To dissolve the diphtheritic membrane, Jacobi says "only four medicines have held their ground—lime-water, glycerine, lactic acid and steam." The lime water and glycerine he mixes in equal parts.

He employs carbolic acid, not only locally, but internally, in doses repeated every hour, and sometimes every half hour or even quarter of an hour, dissoved in water, with or without the addition of alcohol. He uses cold water and ice-bags to the swelling of the lymphatic glands. In nasal diphtheria, which he considers a very dangerous complication unless promptly attended to, he injects every hour a solution of carbolic acid, keeping the patient's mouth open during the operation, on account of danger of irritation to the Eustachian tubes. Sulphur he disapproves of as an application by insufflation to the throat.

His directions for disinfecting the room to prevent the disease from spreading are so important and exhaustive that I will give them in his own words:

"Fumigating with roll sulphur is the only practical method for disinfecting a house. The rooms must be vacated. Heavy clothing, blankets, bedding, and other articles which cannot be treated with zinc solution, should be opened and exposed during fumigation, as directed below. Close the rooms as tightly as possible. Place the sulphur in iron pans, supported by bricks placed in wash tubs containing a little water; set it on fire with hot coals or a spoonful of alcohol, and allow the room to remain closed for twenty-four hours. For a room ten feet square, at least two pounds of sulphur should be used; larger rooms in proportion.

"Sulphate of zic and common salt, dissolved together in proportion of four ounces of zinc and two of salt to the gallon of water, are used for clothing, bedding and corpses. The corpse should be kept moist, as the germs of the disease are more apt to spread when the skin is allowed to dry. For sewers and washing, use one and a half pounds of sulphate of iron dissolved in a gallon of water."

Guersant says that there are two indications for performing tracheotomy: First, when the difficult respiration and asphyxia are permanent and without intermission; secondly, when the disease is not general, but local.

In introducing bicarbonate of potassium to the profession as a new remedy, I do it, not as an empiric treatment, or on theoretical grounds on account of its being an active alkaline and diaphoretic, but I can recommend it honestly; and I can say for it that for the last sixteen years, through several severe epidemics, I have used it in one hundred and twenty-five cases of diphtheria, without losing a single life; while at the same time, under the usual treatment by other physicians around me the type of the ferocious disease has often been so fatal that I have known two, three and even as many as seven patients to die with it in one family in my neighborhood. But I will not be responsible for the success of this alkaline treatment unless the auxiliary treatment described in this article—a great portion of it approved by the kings of our profession—accompanies the use of the bicarbonate of potassium.—*Virginia Medical Monthly.*

TREATMENT FOR TAPE WORM.—Dr. W. C. Bennett, Danbury, Conn., in New England Medical Monthly: In the treatment for tape worm it is the custom, I believe, to give the remedy to the patient fasting. Is it right? To whom is the remedy addressed; to the man or the parasite? The worm has a small head with a long and comparative large body, composed of joints nearly independent, which, when mature, separate (are not broken) and are discharged with the ova. The head anchors the worm but does not materially nourish it, which is done by absorption by the joints themselves. Now, give the remedy to the patient fasting and it is rapidly absorbed, and the man, not the worm, gets the effect of the vermifuge.

If you give the remedy an hour or two after a meal, just as the digested food is passing from the stomach, it is not so liable to be injured by digestion, but passes with the digested food along the length of the intestines, and the worm is bathed with it from stem to stern and gets its full effect. This is my experience.

A SIMPLE EXPEDIENT IN THE MANAGEMENT OF STRANGULATED HERNIA.—Under the above caption, Dr. C. A. Stewart, of Chicago, calls attention to a simple expedient he has resorted successfully to in five cases of strangulated hernia after the taxis had failed. It consisted in dilatation of the constriction which produces the strangulation at the abdominal ring, by passing the

finger along the inguinal canal, carrying the integument before it, until the constricting ring is felt. The finger is then gently insinuated into the opening, and, if the band of opposing fibres does not yield readily, gentle pressure is made against the upper border of the ring until it is felt to give way, when a resort to taxis again will ordinarily result successfully. Last year, I called the attention of the members of our County Society to this plan, and its happy results in several cases.

One of my patients referred to was sixty-eight years of age, and several unsuccessful attempts had been made to reduce the hernia. I had made every preparation for surgical interference, and the patient anæsthetized, when Dr. Green, of this city, attempted it by the above method and succeeded. The effort, though, was prolonged, and much patient and persistent pressure was made upon the fibres of the constricted ring before they yielded. This they ultimately did, but not by the "gentle pressure" Dr. Stewart speaks of. An attack of peritonitis followed the reduction, but the patient made a speedy and happy recovery. Two similar cases treated by the same simple method, with no untoward symptoms following, warrant me in underscoring this "simple expedient." The first case occurred five years ago, and I do not report it with a view of establishing any priority of claim, but rather as confirmation of the practice or plan recommended.—*Dr. S. H. Hurd, in Medical Record.*

RAGWEED AS A HÆMOSTATIC.—Dr. J. H. Hill (Transactions of Society of North Carolina) extols the virtues of ragweed (*Ambrosia artemissæfolia*) as a hæmostatic. One of the cases he reports was an aggravated case of hæmostatic. One of the cases he reports was an aggravated case of hæmophilia, in which the blood oozed from the nostrils, gums and urethra. The patient, a child six years of age, had been bleeding for several days, and the usual remedies had been employed without effect. Dr. Hill then administered an infusion of ragweed and the hemorrhage promptly ceased.—*New Eng. Med. Monthly.*

GONORRHŒAL WARTS.—Nussbaum (says the Medical and Surgical Reporter) treats these warts by washing them with salt water, and afterwards sprinkling them over with calomel. The chemical reaction results in the formation of bichloride of mercury. The treatment is rapid and painless, and does not detain the patient from business.

THE VALUE OF BORIC ACID IN VARIOUS CONDITIONS OF THE MOUTH.—Boric acid is now officinal, and justly so. It has long been used in various metallurgical and ceramic operations, and more recently its preservative power has been abundantly demonstrated. It is this antiseptic power which gives it its great therapeutic value. It is a very stable compound—one of the most stable of the acids; it is not volatile, and exerts its action when in solution; fortunately, however, it is soluble in more than one menstruum. Up till now, its chief application has been in connection with modern surgery, where the boric ointment, lint, and lotions all hold a prominent place.

There are, however, also spheres of usefulness for it in medicine, and Dr. A. D. Macgregor (British Medical Journal, July 11, 1886) calls attention to the fact that it is especially valuable in the treatment of diseases of the mouth. It is the benefit of its local action we usually wish to gain, for, though sometimes given internally—as in irritable conditions of the bladder—its topical antiseptic effect is more often desired. In connection with its local application in various diseased conditions of the mouth, its solubility in water and glycerin, its unirritating character, its almost tastelessness, are greatly in its favor. More particularly is this the case in treating such conditions in children, whose oral cavities cause them so much annoyance. Speaking generally, boric acid will be found useful in all conditions of the mouth, fauces, pharynx, and nose, where there is any abrasion of the epithelium; whether it be used as a powder, gargle, mouth-wash, pigment, or confection. More definitely, it is not contra-indicated in any forms of *stomatitis*, though scarcely severe enough for the graver varieties.

In *simple catarrhal stomatitis*, a mouth wash, containing from 10 to 15 grains to the fluid ounce, speedily cures the condition, and exercises the same beneficial influence in the *ulcerative* form, though there, in addition to the rinsing of the mouth, a local application, in the form of the powder or pigment, should be made to the individual follicular ulcers. The powder simply consists of finely-powdered boric acid, mixed in various proportions with starch; the pigment is a solution of boric acid in glycerine (1 in 4 or 5). In both cases, the addition of chlorate of potassium is advantageous; indeed, Mr. Macgregor usually combines it, but it is not essential.

Nothing, according to Dr. Macgregor, is at once so rapid and

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ALKALOIDS, SALTS, RESINS AND RESINOIDS.

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SULPHATE HYDRASTIA (Berberina) strictly pure, in crystals.

Physicians should discriminate closely between *this article* and the impure cheaper forms in which the quantity of resinous and attractive matter is so great as to make their use dangerous, especially in the treatment of Chronic Conjunctivitis, Catarrhal Affections of the Bladder, and other delicate conditions in which *irritation must be avoided.*

CITRATE HYDRASTINA—(Hydrastia)

A Citrate of the White Alkaloid, intensely bitter and very soluble. This is a favorite form with many physicians who favor the White Alkaloid as a remedial agent.

HYDRASTINE—(Principles combined)

A combination of the White and Yellow Alkaloids, each carefully isolated, purified, and re-combined in their native proportions, as they exist in the root.

HYDRASTIA—Pure White Alkaloid, in crystals.

This Alkaloid exists in the root in very small proportions. It is coming into use, however, triturated with Sugar of Milk; and also in combination with Subnitrate Bismuth in the preparation introduced by us as "*Solution Bismuth and Hydrastia.*"

PODOPHYLLIN;—LEPTANDRIN.—

Both well known and universally used, both in this country and in Europe.

EUONYMINE—

The investigations of Dr. Rutherford, under the auspices of the British Medical Association, have given this remedy an advanced position as a valuable remedy in all diseases having an Hepatic origin.

CAULOPHYLLIN.

A remedy of frequent and extended use in the treatment of Female Diseases.

CYPRIPEDINE—

Nervine and Anti-spasmodic, and especially valuable in the treatment of Chorea, Hysteria, Nervous Debility, etc.

DIOSCOREIN—

An almost indispensable agent in the treatment of Bilious Colic, either alone or in combination with Asclepedin.

HELONIN.—

As a *Uterine Tonic* this remedy is deserving of an extended use in all diseases peculiar to females; it also possesses *Diuretic* properties of value.

MACROTIN—

This is the precipitated Resin of the Black Cohosh, with a wider range of medicinal action than almost any other of our indigenous drugs or their preparations. Its special province is as an Emmenagogue, Parturient, Tonic and Anti-Rheumatic

NITRATE SANGUINARINA (Introduced by us).

For extended notes on this preparation send for circular. In *Croup*, Scarlatina, Diptheritis, Pseudo-Membranous Croup, Nitrate Sanguinarina has proved to be almost a specific; not only relieving the inflammation of the fauces, but also dissolving the adventitious formation.

SCUTELLARINE—

Nervine, Tonic and Anti-spasmodic. This agent occupies an important place in our list of Remedies. Recommended in Convulsions, Chorea, Hysteria, Neuralgia, Nervous Debility, etc.

We also manufacture all other remedies of this class in general use. For full list see our Price Current.

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PECULIARITIES IN THE MANUFACTURE OF JENSEN'S CRYSTAL PEPSIN; NATURE OF THE IMITATIONS, ETC.

THE champion pepsin of the world! The only pepsin found worthy to be imitated! Even the wealthiest manufacturing chemists could not resist the temptation!

One party used glue as a cheapening adulterant for the production of scale pepsin; another party has now succeeded in flooding the market with their imitations of my scale pepsin, owing to its extreme cheapness. This party now declares (not to the profession) that they use sixty pounds of dry egg albumen, peptonized by two hundred hogs' stomachs. A third party wrap their imitations in an exact *fac simile* of my circular, making full use of all my testimonials. The great injury these imitations cause my preparations can easily be understood.

The protection chiefly relied upon is through the profession's vigilance in discriminating between the genuine and the spurious article. When prescribing my pepsin, most physicians now underline my name thus, JENSEN'S Crystal Pepsin, and no misconception can excuse substitution. The great reputation of this pepsin lies in that it is a peptone pepsin, *i e*, the texture of the stomachs in which the ferment is lodged is entirely dissolved, thereby obtaining all the pepsin. When thereto is added my recent improvement in precipitating from this solution all of the earthy and saline matter, leaving only the azotized constituent, containing all of the peptic principle, and, finally, is further concentrated by drying it upon glass plates until brittle scales are formed, the reason for its high digestive power can easily be understood. Why it surpasses also in keeping qualities all of the former pepsins, is owing to its scaly and brittle texture, it being the only organic medicine in the materia medica produced for the market in scales.

It is also perfectly soluble upon the tongue, pleasant to the taste, and practically inodorous.

Although it commands a higher price than any other pepsin in the market, it is nevertheless, the most prescribed. Its purity and solubility, combined with its great digestive power upon albuminoids, have inspired physicians of a suggestive mind to try it also as a solvent for diphthertic membranes and coagulated blood in the bladder. The success also of these novel uses, has already become generally known to the profession all over the world. Physicians writing for samples will receive prompt returns

Dr. Hollman (*Nederl. Weekbl.*, 18, p. 272) reports the case of an old man, aged 80 years, suffering from retention of urine, in whom the introduction of a catheter failed to produce the desired result. It was found that the bladder contained coagulated albuminoid masses mixed with blood. A few hours after the injection of about 16 grains of Dr Jensen's Pepsin dissolved in water, a large amount of a dark, viscid, fetid fluid readily escaped by the catheter. —*London Medical Record.*

Dr. Edwin Rosenthal, acting on the suggestion of Dr. L. Wolff, has used an acidulated concentrated solution of pepsin as an application to the membranes of diphtheritic patients, for which there seemed to be no other help than tracheotomy, and reports that it acted like a charm, dissolving the membranes, admitting a free aeration of the blood, and placing them soon on the road to convalescence. The solution he used was:

℞. Jensen's Pepsin.....ʒ j,
Acidi Hydrochloric, C. P..gtt xx,
Aquæ q. s. ft.....fl. ʒ j.

M. S.—Apply copiously every hour with a throat-mop.—*From the Medical Bulletin.*

FOMULA FOR WINE OF PEPSIN:

℞. Carl Jensen's Pepsin.....gr 192,
Sherry or port wine.....ʒ viss,
Glycerin puris.....ʒ iss,
Acid tartaric.....gr v.

Sig.—f ʒ j. after meals. This is three grains of the pepsin in each teaspoonful.

For severe attacks of colic it has afforded present relief, after a few doses have been given in short intervals, when other remedies have failed.

CARL L. JENSEN,
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so efficient, in the treatment of *parasitic stomatitis* or *thrush*, as this remedy. The youngest children do not object to its application. The *oidium albicans* quickly succumbs to its influence. For thrush in children, he especially recommends boric acid, either as a mouth-pigment or as a confection. Honey and sugar have both been condemned as being admissable, in combination, for the treatment of thrush; but, so far as children are concerned, Dr. Macgregor considers a confection (though made with honey), which has been impregnated with boric acid, gains more by its palatableness than it loses by the tendency of the saccharine matter to further the growth of the fungus. The boric acid at once does away with this tendency. Let the pigment be frequently painted with a brush over the patches, never omitting to do it after food has been taken; or, a little of the confection, simply allowed to dissolve in the mouth; and the days of the fungus will soon be ended. He has found boric acid, combined with its salt (borax), markedly beneficial. Borax alone, however, is not nearly so good.

In *pharyngitis* and *relaxed conditions of the throat*, a gargle, containing boric acid and glycerin, with either tannic acid or alum in addition, ought not to be forgotten.

Dr. Macgregor has also found combinations of this substance helpful and grateful to the patient in the condition in which we frequently find the mouth, tongue, and teeth in severe cases of typhoid fever. The mouth is hot; the lips dry, cracked, and glued to the sordes-covered teeth by inspissated mucus and saliva; the tongue dry, or even glazed and hard, brown or black, crusted with a fœtid fur. Under such circumstances, a pigment, containing boric acid (30 grains), chlorate of potassium (20 grains), lemon-juice (5 fluidrachms), and glycerin (3 fluidrachms), yields very comforting results. When the teeth are well rubbed with this, the sordes quickly and easily become detached; little harm will follow for the acid attacks the masses of bacilli and bacteria; the chlorate of potassium cools and soothes the mucous membrane; the glycerin and lemon-juice moisten the parts and aid the salivary secretion.

So much for the soft parts; a word in conclusion regarding the teeth. Few medical men have ever given a prescription for a tooth-powder (such a matter is beneath their notice), and the selection of the ingredients for the various powders and pastes in vogue for the purpose of beautifying and cleansing the teeth

is left entirely in the hands of those who certainly should not know better than medical men.

A tooth-powder should possess certain characteristics; it should be antiseptic, cooling, agreeable to taste and smell, and have no injurious action on the teeth. After use, it should leave the teeth white, and a sensation of freshness and cleanliness in the mouth. As an antiseptic in this connection, nothing can displace boric acid. For years Mr. Macgregor states that he has used the following powder, and can recommend it: Boric acid, finely powdered, 40 grains; chlorate of potassium, ʒ ss; powdered guaiacum, 20 grains; prepared chalk, ʒi; powdered carbonate of magnesia, ℥i; otto of roses, half a drop. The boric acid in solution gets between the teeth and the edges of the gums, and there it discharges its antiseptic functions; the chlorate and guaiacum contribute their quota to the benefit of the gums and mucous membrane generally; the chalk is the insoluble powder to detach the particles of tartar which may be present, and the magnesia the more soluble soft powder which cannot harm the softest enamel.

LACTIC ACID AS A CAUSTIC.—In the Centrablatt fur Chirurgie, No. 12, 1885, Prof. Mosetig made the following astonishing announcement: "Acidum lacticum is a means of destroying morbid tissues, and distinguishes itself from all other hitherto known and employed caustics by sparing the healthy tissues."

It is, however, a well-known fact that all caustics destroy far more easily morbid than healthy tissues, and besides, the mentioned property of lactic acid is now disproven by the experience and publication of Drs. Spitzer and Hermann, of Vienna, in the Wiener Medical Blatter, of February 25, 1886.

These observers publish eight cases of lupus and epithelioma treated in the Allgemeines Krankenhaus in Wienna with concentrated lactic acid as proposed by Mosetig, and state their conclusions as follows:

1. The pain produced by the cauterization with lactic acid is at least as great as that caused by any other caustic.

2. The patients prefer invariably any caustic to lactic acid.

3. The action of lactic acid resembles that of other caustics, but is less energetic.

4. Healthy tissues are not spared any more by this than by any other caustic.

5. Lactic acid has to be employed for a much longer time than chloride of zinc and other energetic caustics.

In this connection we would call attention to the reports published in recent numbers of the Gazette where a large number of authorities were quoted as claiming most favorable results and confirming the statements of Mosetig-Moorhof in all particulars.

[We have used lactic acid in three cases of malignant ulcers of the face and mouth. Our experience coincides with that of Prof. Mosetig.—ED.]

VACCINATIONS DURING THE INCUBATION OF SMALL-POX.—M. Gubert, a Russian medical student, has been experimenting with a view of finding out whether there was any value in vaccination performed on a person in whom small pox was incubating, or who was already attacked by the disease. By repeating the vaccination on three successive days he was able to produce mature vesicles in four or five days. He states that he arrested the development of the disease in twenty-seven persons in whom it was incubating, and in twelve the disease was so modified as to be considered only varioloid. The vaccination was performed in some cases after the temperature had reached 104°. His experiments were with calf lymph. On the other hand, it may be said small-pox will not always prevent vaccination working out a pustule.

THE NEGRO FROM A MEDICAL STANDPOINT.—The negro is rarely or never myopic. Their only eye trouble is phyctenular conjunctivitis. They rarely have granular lids. The negro bears surgery remarkably well. Syphillis in the negro is generally very mild. One half of all negro men have syphillis, and it does not seem to seriously hurt them. Gonorrhœa is easily cured in the male. In the female it does most harm, causing endometritis and sterility. The negresses often have uterine fibroids, but very rarely ovarian tumors. Uterine cancers are very rare, although lacerations of the cervix are very common. Insanity is rare.—*New York Medical Journal.*

ACTION OF PANCREATIC JUICE.—The new researches of M. Defresne have authorized him to express this opinion, viz. that the pancreatic juice at the commencement of a repast, passes

into the state of zymogen in the circulation, and is afterwards separated by the liver, the parotid glands and the spleen. In the liver it becomes a hepatic zymosis, capable of saccharifying glycogen; in the patroids, a ptyalic zymosis, capable of saccharifying starch in the mouth; and in the spleen, a zymosis which transmitted to the pancreas, communicates to the juice of this gland the property of saccharifying starch in the duodenum. These experiments demonstrate the good results which may be obtained by administering pancreatine by the stomach.—*Journal of the American Association.*

THE PHYSIOLOGICAL ACTION OF URETHANE.—Prof. Coze, of Nancy, sums up the physiological action of urethane, the new hypnotic, as follows: 1. Urethane has a marked hypnotic action, causes muscular relaxation, and in large doses, anæsthesia. 2. It lowers the pulse and respiration, and reduces temperature. 3. It is slightly irritant, but may be administered subcutaneously. 4. It does dot disturb nutrition, nor the fluids of the body. 5. It is physiologically, an antidote for strychnine. 6. It should be tried in all cases of convulsions, particularly tetanus.—*Buffalo Medical and Surgical Journal.*

FURNITURE POLISH.—Melt three or four pieces sandarac, each of the size of a walnut, add one pint of boiled oil, and boil together for one hour. While cooling, add one drachm of Venice turpentine, and if too thick, a little oil of turpentine also. Apply this all over the furniture, and, after some hours, rub it off; rub the furniture daily, without applying fresh varnish, except about once in two months. The Scientific American, which gives this formula, says water does not injure this polish, and any stain or scratch may be again covered, which cannot be done with French polish.

THE TREATMENNT OF ECZEMA MARGINATUM.—A writer in the Gazette Lekarska gives the following formula: Salicylic acid, 10 parts; ichthyol, 20 parts; alcohol, 100 parts. To be rubbed on the affected part twice a day with a stiff brush, after which the surface is to be well powdered. This treatment is said to be very effective, although mild, simple and cleanly. A case of eighteen years' standing is cited as having been cured with it in less than three weeks.—*N. Y. Medical Journal.*

PEPTONIZING FERMENT IN FIGS.—Dr. A. Hansen (Phar. Jour. and Trans.) has been investigating the digestive properties of the common fig, and finds that the statements made by others, concerning a peptonizing ferment in this article of food, are correct. It acts also on starch and sugar. A syrup of dried figs is active. It is suggested that a syrup be made of this fruit, to be administered to children along with starchy foods so much in vogue.

PAINLESS CATHETERISM.—Dr. John A. Stamps recommends (Medical and Surgical Reporter) the following as an almost painless method of cathetering an hyperesthetic urethra. Inject through the catheter while it is being introduced, water as warm as can be borne. The water regurgitates between the instrument and the urethral wall, and the warmth of the water will, in many instances, relieve all irritability of the urethra.

CAPSULES.—The oldest capsule manufacturers in the United States are H. Planten & Son, of New York City. They have for years been supplying the Army and Navy with their goods, besides a good share of the World. They make a full supply of everything in the capsule line, and may be relied upon as using the best of everything in the manufacture of their products. Write them for samples and prices.

DR. R. R. SMITH writes to the American Medical Journal that he cured a case of hepatic colic (impacted gall stones) of great severity by administering 6 fluid ounces of sweet oil at one dose. Patient to lie upon left side half an hour, then to assume any position preferred. Result of which was freedom of pain and passage of gall stones. This simple remedy has often succeeded in many of the severest attacks of hepatic colic.

COCAINE IN ANGINA PEGTORIS is recommended by Laschkevitch, who reports four cases successfully treated by the administration of this medicament, in doses of one-third to one-half grain, three times a day.

ICHTHOL IN CHRONIC URTICARIA is recommended by Unna in doses of 5 drops, and applied externally to the affected part. The pure drug is used, so says the Therapeutic Gazette.

DYSENTERY OF CHILDREN—ERGOT.—Medical Summary says: Twenty-one cases of dysentery in children, reported by Dr. G. Magruder, of Washington City, were treated with fluid extract of ergot, 5 to 20 drops, four or five times a day. Almost every case responded to treatment, and was either entirely relieved or much improved.

TEST YOUR CASTOR OIL.—According to the Druggists' Circular, efforts are being made to push a cheap mineral oil as an adulterant to castor oil. The fraud may be detected by adding the oil to strong alcohol, which will dissolve pure castor oil, but not the other substance.

GONORRHŒA is very successfully treated, on the average, by the following: ℞. Sulphate of hydrastin, ℈ i; sulphate morphia, grains x; zinc sulphate, grains v; glycerine, ʒ i; water, q. s. ad ʒ vi. M. Sig. Inject the urethra every two hours; after twenty-four hours, use three or four times a day.

"HOT FLASHES," so annoying to women in the menolipsis of life, diluted sulphuric acid, in doses of 15 or 20 drops in a glass of sweetenad water, and repeated three times a day, is recommended by Dr. ——— in Medical Brief.

LINSEED OIL IN PRURITUS ANI is highly praised by a writer in the Boston Medical and Surgical Journal, used freely as a local application to the affected parts.

ANGINA PECTORIS.—Hurchard recommends the prolonged use of iodide of sodium as a valuable medicament in the treatment of this disease.

HERPES ZOSTER is well treated by oil of peppermint rubbed on the affected part; so says Dr. G. T. Fuller in Eclectic Medical Journal.

THE JEWS.—Their population in the various countries of the world is set down in the Bulletin of the Geographical Society of Marseilles, France, as follows: The grand total number of Jews in the world is 6,377,602; in Europe there are 5,407,602; in

Asia, 245,000; in Africa, 300,000; in America, 300,000; in United States, 200,000; in Oceana, 12,000. In Europe the Jews are thus distributed: In Austria-Hungary, 1,643,708; in Germany, 561,612; in Great Britain, 60,000; in Belgium, 3,000; in Denmark, 3,946; in Spain, 1,900; in France, 70,000; in Greece, 2,652; in Switzerland, 7,373; in Holland, 8,693; in Italy, 36,289; in Luxemburg, 600; in Portugal, 200; in Roumania, 260,000; in Russia, 2,552,145; in Servia, 3,492; in Sweden and Norway, 3,000; in European Turkey, 116,000; in the Asiatic Provinces of Turkey, 150,000; in Persia, 15,000; in Asiatic Russia, 47,000; in India and China, 19,000; in Turkestan and Afghanistan, 14,000; in Africa, there are in Algiers, 35,000; in Morocco, 100,000; in Tunis, 55,000; in Tripoli, 6,000; in Abyssinia, 200,000; in Egypt, 8,000; scattered on the desert, 8,000; Cape of Good Hope, 1,000.

TRITOXICON is the name given by its discoverer, Prof. Victor C. Vaughan, of the University of Michigan, to a subtle poison developed in milk that has become somewhat stale. Many cases of wholesale poisoning by partaking of ice-cream, iced-milk, and stale butter, and sour milk, have recently been reported in the newspapers and medical journals. Some authorities affirm that a heat of 180° F. will change and drive off this poison from milk. This is somewhat doubtful. We need be cautious in ordering a milk diet, especially for sick children in Summer when milk is likely to be rapidly changed and take on poisonous qualities, unless it has been properly cooled and kept in a well ventilated, cool place, free from deleterious vapors and germs. Tritoxicon is allied chemically to butyric acid.

WATERMELLON VINES AS A SOURCE OF MUSK.—Dr. A. G. Chan claims that the terminal buds of the watermellon vine contains a principle that has the therapeutic properties of musk, and which has valuable nervine properties. He collects them, and makes a watery extract of the consistence to form pills. Size of dose not stated.

POLYURIA IODOFORM.—As much as 12 litres (= to 12 quarts) a day was passed. Under iodoform, 40 centigrammes (= to 6 grains) increased to 1.40 grammes (= to 21 grains) a day, the urine diminished from 12 to 9, 7, 5, 4, and 3½ litres.—DR. PAOLETTI, *Analectic.*

EDITORIAL

THE SITUATION IN ALABAMA.

The mud gods of Medicine, under the inspiration of the Trades-union Medical law of that State, commenced a legal (?) prosecution against D. B. Williams, M. D., a graduate of the Georgia College of Eclectic Medicine and Surgery, for not obtaining license by going before the county board of Allopaths to be examined and rejected, if deemed obnoxious to Allopathic interests in Alabama. Dr. Williams, who is a son of J. W. R. Williams, M. D., of Opelika, Ala, the noblest Roman and the most prominent Eclectric in Alabama, was ready for trial, but it seems the mud gods were not as sanguine and sure as they pretended, so they asked and obtained, on the very brink of the proceedings, a continuance of the case. This seems to indicate that the Trades-union Medical law of Alabama will not bear any rough handling; or why, in a clear case like this, ask for a continuance? The Allopaths all over this free land are ever alluding to the Alabama Medical law with the most lavish commendations and praises, simply because it is the most abominably Trades-union and sectarian any medical legislation could possibly be in this land of free men, free speech and free thought. What established Church in Europe is any more thoroughly pampered and protected by law than is the Allopathic Medical Church of Alabama? This kind of legislation is the boon the Allopaths in every State is lusting after, to obtain which they will stoop to things even the old-time clergy would eschew with disdain.

The Eclectics of Alabama are wide awake, and armor-clad now, and the fight is not so one-sided as it was when they were inactive and supine.

THE INTERNATIONAL MEDICAL CONGRESS is to be a grand hippodrome—a regular Barnum's show of Allopaths, and "sich." The managers sent out a committee of drummers to visit England, with cards of invitation and free tickets for the show. We learn the managers have invited the British Queen and the Russian Czar, with promise of a premium for their attendance. The whole posse of high officials of the National Government, including the President and his Cabinet, all the headmen of both houses

of Congress, the Supreme Court, the Army and the Navy are invited. The price of admission is $10 for a ticket, and none but simon pure, dyed-in-the-wool Allopaths of the Allopathic persuasion can obtain one of these tickets. The hippodrome is to be the biggest attempt at out-and-out toadyism ever thought of in the United States. The old Code Allopaths are nothing above aping European methods and manners. Monarchial and despotic methods and notions are their models. Through the intense bigotry and intoleration of the American Medical Association the Allopaths find their ranks split in twain. The old Coders are, therefore, making grand asses of themselves in divers ways. Their disgusting toadyism and mean-spirited bigotry are well matched. Huzzah for the Allopathic Hippodrome!

PROPER DIET FOR CHILDREN.—"Technics" gives this excellent advice from the pen of Dr. Arthur W. Meigs:

"Children under two years of age are generally best fed on milk and milk foods, and the less this is departed from, as a rule, the better. Under this age they should never be taken to the table, for it only gives the child a fancy for articles of diet which, if it never saw, it would never want. In the great majority of cases, children have not much desire for animal food of any sort until the first dentition is over, unless the craving is fostered in them by their being given one thing and another to eat, and thus there is created what is almost an unnatural appetite. This, of course, is not intended to be an absolute rule, for many children want, and seem to need, after the first year, a meal once or twice a day of something besides bread and milk. But no mother should feel uneasy if her child takes almost nothing but milk and bread and butter until it is two years of age."

ICE IN THE SICK-ROOM.—A correspondent of the National Druggist thus writes:

"The writer's son suffered with typhoid fever during the heated term of last Summer, when the temperature of the room often rose to 90° or 95°. and the patient's temperature ran up to 105° F. and over.

"A number of tubs were placed in the room and kept filled with ice, and the doors kept closed. The temperature of the room sank to 80° or less, an average of 12 or 15° below the temperature of the other rooms in the house, and the cooler atmos-

phere not only added to the comfort of the patient, but aided in keeping down the body-temperature, and materially contributed to a final recovery.

"We would strongly urge the use of ice in the room as a measure of comfort and luxury for all who are confined to their beds during hot Summer days."

A FEW GOOD OLD FORMULÆ.

Third Preparation of Lobelia (compound lobelia and capsicum).

℞. Lobelia seed, pulverized.....1 oz.
Skull cap root, pulverized.....1 oz.

Add these to 20 fluid ounces of hot drops (No. 6), or use the No. 6 as a percolating fluid and percolate the lobelia seed and skull cap root till 20 fluid ounces have been run off. This is a powerful stimulant and anti spasmodic. It exercises a decided stimulant influence on the vegetable system of nerves.

Spice Bitters.—

℞. Poplar bark; bayberry; golden seal, aa....1 pound,
Capsicum; cloves, aa.....4 ounces.

All in fine powder; mix well by sifting together.

Dose, a teaspoonful three times a day. A tablespoonful may be infused in half a pint of boiling water; dose, a tablespoonful several times a day.

We have received the Annual Report of the Commissioner of Pensions, to the Secretary of the Interior, for the year ending June 30, 1886, for which we return thanks to Hon. J. C. Black, the efficient and impartial Commissioner.

SALICYLATE OF SODA is valuable in congestive headache, 10 to 20 grains; in tonsillitis, 20 to 30 grains; in serous diarrhœa, 10 grains; chronic bronchitis, 10 grains, repeated every two to six hours. Better than the salicylate of soda is the salicylic acid dissolved in solution of acetate of ammonia 5 to 10 grains of acid to 60 or 90 minims of solution. This is a good combination in rheumatism, typhoid fever, cholera infantum, pneumonia, septicæmia of various sorts, etc., where there are low blood pressure and high temperature. The ammonia protects against the depressing action of the salicylic acid on the heart.

IOWA STAR CHAMBER.—WE hope the liberal physicians of Iowa will unite to fight and kill the present abominable medical law now in force in that State. The "board" created by that law is nothing short of a vulgar star chamber, and its minions inquisitors. The law was obtained through shameful and fraudulent means such as no honorable or high minded men would stoop to. If that law stands the Eclectic physicians of Iowa are unworthy their high calling and great estate.

BORIC ACID AND BORAX, combined in solution, will be the antiseptic of the future. This combination has solid merit to commend it to the confidence of the profession for all uses in the antiseptic line. The strength can be increased all the way up to saturation. About 20 grains to the ounce of either or both. Ten grains of permanganate of potassium added to the pint of the above solution gives us a powerful antiseptic free from all dangerous properties.

TO DEODORIZED IODOFORM.—Add 5 drops of oil of peppermint to an ounce of the the dry powder or ointment of iodoform; so says Dr. C. K. Gregg, in Daniel's Medical Journal.

REMOVAL.—I. Phillips, Surgical Instrument dealer, has removed to 14 Marietta street, next door to Phillips & Crew's.

J. LINDSAY PORTEOUS, M. D., F. R. C. S. M. R. C. P. ED.—The April number of the Edinburgh Medical Journal says: Of late there has been a great influx of new drugs; some of great value, others of little or no use. Where a medical man has an extensive practice, consisting of rural and urban patients, he has ample opportunity of testing the effects of drugs, as the varieties of disease that come under his notice are great; and although his means of watching the actions of drugs are not so good as in hospital practice, yet a good deal can be done if he cares to take a little trouble to "take notes."

The following is one which has been used for some time by my colleague (Dr. Proudfoot) and myself, and I give the results:

Bromidia.—About eighteen months ago a friend of mine from America told me of the wonderful effects of a medicine, much used in the States, called Bromidia. According to the makers, it is composed of chloral hydrate, 15 gr.; potassium bromide, 15

gr.; extract of cannabis indica, ⅛ gr.; and extract of hyoscyamus, ⅛ gr. I obtained some, and have ordered it regularly for over a year; and have found it excellent in the pain of rheumatism, phneumonia, and cancer; also in the sleeplessness of scarlatina and alcoholism. It has never failed me in procuring sleep, without the disagreeable dreams and after-effects of opium. The dose is ʒss. to ʒj. every hour till sleep is procured. I have also found it of much service in cases of tonsillitis, used as a gargle with glycerine and carbolic acid.

PARKE, DAVIS & Co.'s EXHIBIT during the meeting of the National in Atlanta, last June, was of the kind that challenge the admiration and win the praise of both lay and professional observers. For opulent grandeur and composite variety we doubt its ever being excelled and probably seldom equaled. Nearly everything that mammoth firm manufactures was on exhibition. We heard several physicians remark that they had not thought it possible, previous to seeing this exhibit, that any one manufacturing house in America could be engaged in such a herculean enterprise and so diversified and extensive as this exhibit showed Parke, Davis & Co.'s concern to be. Dr. Stone was master of the situation from the beginning to the end of the grand show. As a showman we write him down as a second Burnum, for certainly he had the best drug circus that was ever brought into Atlanta. Brother Stone knows how to tickle the doctors; you would have said he does had you seen his liberality and generosity in giving away samples by the bushel. How can you afford this kind of "free donation" we thought to ourself; but, then, we know how liberal and unselfish are the great men who run and manage the great manufacturing house of Parke, Davis & Co. Correspond with them; they will treat you liberally.

SHARP & DOHME.—This is one of the oldest and best known drug and medicine manufacturing establishments in North America. Established many years before the war, in Baltimore, Md., the grand old firm has lived through the crashes of business revolutions and the shocks of war, growing stronger in advancing years, and with increased and untarnished reputation. The names of Sharp and Dohme has become household words with physicians in general, and everything bearing the stamp of this house is a guarantee to purity and reliability. Give Sharp & Dohme a part of your patronage.

TO THE MEDICAL PROFESSION.

ISAAC PHILLIPS,

—DEALER IN—

GEO. TIEMAN & CO.'S CELEBRATED

SURGICAL INSTRUMENTS,

—AND A. L. HERNSTEIN'S,—

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Full line of all leading Instruments constantly kept on hand, viz:

Pocket Cases of Instruments	$5 00 to	$35 00
Speculums—Vaginal	2 50 to	4 50
Speculums—Rectal	2 50 to	4 50
Hypodermic Syringes	1 00 to	6 00
Hypodermic and Fever Thermometers, sets	3 50 to	6 00
Camman's Double Stethoscopes	2 00 to	3 50
Fever Thermometers	1 00 to	3 50
Obstet Forceps—Hodges'		5 00
Obstet. Forceps—Taliaferro's		6 00
Obstet. Forceps—Elliott's		6 00
Obstet. Forceps—Simpson's		6 00
Taliaferro's Speculum		2 50
Sims Speculum		2 00
Brewer's & Sims' Combined		2 50
Aspirators	10 00 to	15 00
Scales	1 00 to	5 00

Amputating, Trepaning, Minor Operating and Eye and Ear Instruments in sets or single. Also, Vial Cases from $1 50 to $5 00; Hand and Buggy Cases, $6 00 to $15 00; Hernstein's Perfection Saddle Bag, 30 bottles, $9 00; Stephens' new Bags, 30 bottles, rubber stoppers, $9 00.

A full line of Gynæcological Instruments, Urethral Instruments, Minor Operating Instruments, Silk Stockings.

Crutches, Batteries, Etc., Trusses. Suspensories, Abdominal Supporters, Pessaries, Post-Mortem and Dissecting Instruments, Oral, Laryngeal, and Œsophageal Instruments, Steam Atomizers and Spray Apparatuses of all Kinds.

Orders by Mail will receive our Best Attention, and Satisfaction Guaranteed.

N. B—The only house in the South selling exclusively Surgical Instruments, and at prices less than can be bought in New York. Send your list for prices. Discount of 25 per cent. offered from any illustrated catalogue list. Mention this Journal. 9-86-1 y

BOVININE!

Bush's Fluid Food,

Containing 26.58 Per Cent. of Soluble Albuminoids.

The vital principles of Beef and Mutton concentrated. A highly condensed Raw Food Extract. Acceptable to the most delicate taste and smell. Retained by delicate stomachs that reject all other Foods. It assimilates more readily than any other Food known to the Medical Profession. BOVININE under the microscope shows the blood corpuscles in their normal condition strongly marked, while in all other Foods or Extracts this vitally important element is destroyed by the action of heat in cooking.

OSCAR OLDBERG, Ph. D., Prof of Chemistry and Toxicology, and Dean of the Chicago College of Pharmacy, says of it: "I have analyzed Bush's Fluid Food or BOVININE, to find that it contains 26.58 per cent. of soluble Albuminoids."

A. L. LOOMIS, M. D., Prof. of Bellevue Medical College, says: "I prescribe Bush's Fluid Food or BOVININE, and prefer it to similar preparations."

J. S. JEWELL, M. D., Chicago, says of "BOVININE": "I am delighted with it; it is what I have been looking for these twenty years, and it supplies a want that nothing else has been able to fill."

Drs. WARD and FEWSMITH, speaking for themselves and their colleagues of the Hospital of St. Barnabas, Newark, says: "BOVININE was readily taken by the patients, was easily retained, and in many cases by stomachs which had rejected all other forms of nourishment. We believe BOVININE contains more nutriment, relatively to bulk, than any other preparation known to the medical profession."

Dr. J. M. RAND, Surgeon to the Hospital for Women and Children, of Newark, N. J., says: "BOVININE has been used with very satisfactory results after many important surgical operations; and, for all patients whose stomachs can't retain or tolerate other foods, we find the BOVININE invaluable."

During the last four months of his sickness, the principal food of my father, Gen. Grant, was BOVININE and Milk. Oct. 1, 1885. FRED. D. GRANT.

BOVININE is carefully prepared from the formula of the late JAMES P. BUSH, by the

J. P. Bush M'f'g Co., Chicago, Ill., and 2 Barclay St., Astor House, New York.

MURRAY'S
CHARCOAL TABLETS

The increasing demand for a chemically pure CHARCOAL, prepared from only young and tender willow shoots, for medicinal use, has led to the manufacture of these Tablets.

CHARCOAL is so simple and so valuable that it seems ridiculous to extol its qualities, but in our Charcoal Tablets we have the purest form of Charcoal from young willow shoots, and in a form that people take with a relish.

PRICE, 25 CENTS A BOX.

Very popular as a Dentrifice.

Removes the bad odor and taste after the use of Tobacco.

A. D. DITMAN, CHEMIST,

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DITMAN'S
SEA SALT.

A SEA BATH AT HOME

By dissolving the Sea Salt in ordinary water. Used as a luxury for its exhilarating influence, and as a valuable remedy in Debility, Languor, Rheumatism, and Weakness of the Joints, Tender Feet, Nasal Catarrh, etc. Extracted directly from the "foaming billows" by evaporation, at one of the most salubrious spots on the coast. It possesses all the medicinal advantages of the natural water, and at the same time is entirely free from all organic impurities that are usually found in the surf.

A. J. DITMAN, CHEMIST,

Broadway & Barclay st.....NEW YORK CITY

DR. D. B. WILLIAMS, in a letter to us, says: "Tell the Class that there are splendid openings in Alabama awaiting good Eclectic physicians to come and fill them. The people are desirous that Eclectic physicians should do their practice." We receive many letters from Alabama during the year asking that Eclectic physicians be sent to various localities. Dr. Williams says the best people are predilicted in favor of the Eclectic practice, and willingly pay for it.

WE have received from the Rio Chemical Company, of Saint Louis, Mo., a box containing samples of the preparations that are so finely put up by this popular house. Celerina, Aletis Cordial, and Pinus Canadensis are largely used by physicians in all sections of our country with excellent results. Please accept our thanks.

JENSEN'S CRYSTAL PEPSINE.—This we regard as the best scale pepsine on the market. The patent-office reports show that in October, 1883, letters patent was granted to Carl Jensen, of Philadelphia, for a process of subjecting animal stomachs to the action of heat, and whereby a gastric digestion takes place, and peptone containing the digestive or gastric ferments is produced, separating the impurities from said peptone, and then evaporating it to dryness.

This pepsin, in the form of hard scales or crystal, is transparent, odorless, tasteless, capable of being permanently preserved, freely soluble in water, without the use of acids, free from inert additions, and having *a digestive power of one to seven hundred.*

The largest wholesale drug house in the world, that of Gehe & Co., in Dresden, Germany, have placed the weight of their influence on the side of Jensen by buying his product to the exclusion of every other.

UNRIVALED FOR PREGNANT WOMEN.—I have used the Acid Mannate with splendid success as a gentle laxative where mild catharsis is needed, and I find it unrivaled for pregnant women, having the safe and gentle aperient effect desired.

G. A. HULETT, M. D.

Kansas City, Mo.

GONORRHŒA AND GRANULAR ULCERATIONS.—I have used

Kennedy's Pinus Canadensis in gonorrhœa most successfully. I am now treating cases of chronic cervical endometritis, with granular ulcerations, and think it particularly indicated there. It was in such practice, I believe, which elicited Sims' enconiums of its merits. T. N. CLARK, M. D.

Reagan, Tex.

COLDEN'S LIQUID BEEF.—[From James A. Sewell, A.M., M.D., Dean of the Medical Faculty, Laval University, Quebec.]

I am using a good deal of "Colden's Liquid Beef Tonic" in my practice, and have every reason to be satisfied with it. I have found it particularly useful in the advance stages of consumption, and in organic diseases of the liver, when the stomach has been very irritable. In pregnant women it has been retained, while every other article of diet was rejected. I can recommend it as convenient, palatable, and easy of digestion.

[Signed] JAMES A. SEWELL, A.M., M.D.

COMP. AVENIN PILLS, manufactured by B. Keith & Co., New York City.

The Comp. Avenin Pills will be found invaluable in the case of epilepsy, as by their action upon the system they prevent many prostrating attacks.

For headache, hysteria, neuralgia of stomach and bowels, neuralgia of uterus, in diseases of females, when they have a burning feeling on top of the head—administer in hot water, as repeating at proper intervals until relief is obtained.

In painful and deficient menstruation it is invaluable, given in hot water, as indicated. When a more powerful uterine tonic, anti-spasmodic and stimulant is required, the Con. Helonias Comp., Com. Helonin Pills, or Elixir Helonias Comp. No. 2, are specially indicated.

BOOK NOTICES.

The Century Magazine for November is to hand. One quarter of a million is the number of this edition! This month opens with the first installment of the promised Biography of Abraham Lincoln, the martyred and war President of the United States. The Century has never entered upon a more important enterprise, nor one in which the people of the United States, North and South, will take a more lively and all-absorbing interest. It is

hardly necessary to explain that this long-expected history is by no means solely a sifting and re-editing of already printed records and memorials. Its originality is, however, especially notable in its account of Lincoln's administration, in dealing with which will be given to the World important details that have hitherto remained unrevealed, in order that they might appear in their proper connection in this monumental work. The authors of this great undertaking are Mr. John G. Nicolay and Mr. John Hay, private secretaries of the President. Mr. Nicolay took charge of his correspondence before his election to the presidency; was his private secretary during his administration. Mr. Hay, like Mr. Nicolay, accompanied the President from his home in Springfield to Washington, where he remained several years as his assistant secretary, and aid-de-camp to the end of the war. For the last sixteen years these gentlemen have given most of their time to the collection and arrangement of the enormous material at their disposition, which has been gathered together with untiring industry and critical judgment.

In determining the scope and character of their work, the authors were governed by two simple ideas, the first of which was biographical—was to draw the portrait and character of the man Abraham Lincoln, and in doing this succinctly to narrate his actions; the second was historical, and required them to relate the National events of which he was the personal and official center, and the inspiring and directing leader. Their field embraced the picturesque period of Western pioneer life, in which Mr. Lincoln was born and grew to manhood; then the stirring ten years' agitation during which the Nation went through the severe and bitter struggle over the slavery question, and which brought on the intensely moving drama of the American Civil War. Under the lucid statements and explanations of these biographers, the great historic drama of the war between the States becomes coherent and intelligible, permitting the reader to understand its beginnings and to follow its development, through sectional rivalry and jealousy, dissatisfaction, to disunion and disruption and the crash of arms—the mightiest conflict between the greatest of modern armies in march, in manœuvre, seige and battle!

We earnestly recommend our readers to procure and read the Century during the publication of this highly interesting and authentic biography of President Lincoln. Accompanying the

text are: A magnificent true-to-life engraving of President Lincoln, one of Daniel Boon, Sarah Rush Lincoln at the age of 76, step-mother of Abraham Lincoln. The other articles in this number are: The Minister's Charge, a continuation of W. D. Howell's story; Old Chelsea; The Fate of a Voice, a completed story; Machine Politics in New York City; The Need of Free Schools; Hooker's Appointment and Removal; The Battle of the first day at Gettysburg; Memoranda of the Civil War; The Temple of the Ephesian Artemis, and the Ancient Silver Potera from Bernay; Open Letter, etc.

THE COLLEGE.—The Trustees and Faculty are highly gratified with the class, both as to the numbers and the excellent make up of the material. We have an abundance of dissecting material, which is freely used. The clinics, both surgical and medical, are bountiful in quantity and interest. Eclecticism in the South is a grand success.

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THE
ECLECTIC MEDICAL JOURNAL.

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ORIGINAL COMMUNICATIONS.

IS BLOOD-LETTING EVER JUSTIFIABLE?

A REMINISCENCE.

BY J. R. BORLAND, M. D., FRANKLIN, PA.

Last Winter I was called to visit a patient at Mount Hope, about eight miles from this city, once a favored oil territory, tabooed by doctors because of its difficult ascent in climbing a mile of steep hill, afoot, to reach the tableland on its summit. Leaving the railroad at Foster, the hill was climbed, the summit reached, when, after a hard walk of a mile more through snow twenty inches deep, I reached the house in which was the subject of my visit. Before my visit here was ended darkness came on, and I concluded I would get to the railroad by a longer but a better route. In doing so, I came to a house at which I stopped to inquire about the way, when I found it was the same to which I was called fourteen years before. I said to the lady, "Where is the boy that was hurt I was called here to see about fifteen years ago?" She said, "O, he is a big man now, and away working on the pipe line;" and the occurrences I am about to relate came into my mind as vividly as though but recent.

Some fifteen years before, one Fall afternoon, I made one of my then frequent visits in that section, and late in the evening, when on my way to the railroad station, passed this house. I had reached the station, heard the train in the distance, and, looking up the hill down which I had come, saw a man running as I thought to make the train. When he reached me he said, "Doctor, I want you to come to my house." I demurred; he said, "My little boy was kicked and badly hurt; you must come." I said, "If I can send a dispatch to Franklin, I'll go." A gentleman standing by said he would take it to Foster, whence it

could be sent; so after writing a dispatch, directing my partner to visit two bad cases, I accompanied the man up the hill to his house, a mile and a half distant. On the way, he stated that, when turning his horses into pasture, his little son, aged six years, preceded the entrance of the horses, and when they were turned in one of them, in a playful mood, jumped over and struck the boy with one of his feet. The child was knocked down and stunned; that, on carrying him into the house, he bled at the mouth and nose; breathing was reastablished, but he did not recover consciousness. When we arrived at the house, possibly an hour and a half after the injury, I found the child in its mother's arms, apparently asleep. In a few minutes it vomited a quantity of coagulated blood. Bleeding at the mouth and nose had ceased. There was a contusion over one side of the nose and the prominence of the cheek, but no abrasion. I concluded that bleeding was produced from concussion mainly. I told the mother to lay the child in the cradle, which she did, and turned her attention to getting supper. As I could make no train until morning, I concluded to await events, especially *supper!* so, taking a newspaper from my pocket, I sat down by the table to peruse it. In about five minutes thereafter the father, who was sitting by the cradle, called, saying "Doctor, what is this?" Rising and approaching the cradle, I said "It is a convulsion." I felt the pulse; it was bounding full. "There is blood pressure upon the brain, which must be relieved at once." I thought over the contents of my satchel. I was out of all the remedies that could be of any service. I asked for hot water, mustard, capsicum, vinegar, and, strange to say, the hot water had all been used to make the tea, and by a strange oversight in housekeeping, they had none of these things. Every moment was precious, and under such circumstances a doctor, who is good for anything, will think rapidly. Fortunate thought: "I have my pocket case, and in it a sharp, straight bistoury!" The father said, "What will we do?" I said, "We'll bleed him; get me some old muslin." With the bistoury I opened a vein in the arm, which discharged a good size stream. Ere three ounces were taken the convulsion passed off, and when about six ounces were taken I desisted—the child was as limp as a rag. I then put on aconite and belladona. I left at 4 in the morning, up to which time it had no recurrence of the convulsions, nor had it

become conscious, and I felt that the case was but a forlorn hope at best. I left with the injunction to inform me if the child did not do well.

I heard nothing from the case for ten days, when the father came and said, "The child came to itself all right in the afternoon of the day you left;" asked for the bill, and, as he paid it, said with evident gratefulness, "Doctor, you saved my child's life, for which I never can be too thankful."

Could I have done any better with the means at my command? Or, suppose I could have obtained hot water, mustard, capsicum, etc., and had tinc. antispasmodic, tinc. gelsemium, tinc. verat. viride, or any other of the vaunted antispasmodics, and had depended on them, could I have obtained with any of them as prompt and permanent action as was derived from the bleeding?

I have, in several instances, resorted to blood-letting to moderate reaction after serious injury, with gratifying results. While I am opposed to blood-letting as a rule, and my lance has lain rusting in its scabbard for over thirty years, yet, as an Eclectic, I avail myself of any advantage to be derived from it. I will not allow prejudice or preconceived notions to rob me of the utility of any remedy or method. It is always best to do the best thing—*the right thing at the right time.*

CHRONIC RHRINITIS.

BY E. R. WATERHOUSE, M. D., GENEVA, OHIO.

In the practice of medicine, we receive frequent calls to treat nasal catarrh. Many of us will realize in this disease one of our most troublesome maladies. I say troublesome, because it is difficult to do the patient justice with the ordinary modes of medication.

In the majority of cases we find it to be caused by sudden atmospheric changes—damp, cold winds, etc.—which cause a congestion of the nasal membranes. It may be of a strumous, syphalitic or traumatic nature. But that which we now wish to consider is the simple chronic form as from causes above stated.

Each acute attack distends the membranes more and more, resolution becomes slower at each successive round, until the parts have lost their recuperative power, and the chronic form is fully developed. The blood vessels have gradually lost their ability to contract, their walls become soft, and, by the process

of infiltration, the blood elements are carried into the connective-tissue, inducing a thickening.

In the earlier stages the mucous membranes show a deep red color, and by pressing against it with a probe or other instrument we find the blood slow to return when the pressure is released, showing the congested or clogged condition of the capillaries. This inflammatory action not only invades the nasal cavity but often extends downward into the pharynx, and the patient complains of a disagreeable sensation about the tongue. In the majority of cases it is a dry parched sensation; at other times he is greatly annoyed by a constant dripping of the discharges into his throat.

By making a posterior rhinoscopic examination the true condition of the nasal cavity may be observed. The instruments necessary for such an examination consists of a concave laryngeal reflector with a focal distance of ten or twelve inches, together with a head-band, etc. This is used to reflect a strong light and illuminate the throat.

The rhinoscope is a small mirror attached to a long, slender handle, in an angular manner, very much like the laryngoscope; they are made in different sizes, the smaller being one-half inch in diameter, and designated as No. 1. I have often made use of a laryngoscope of this size as a rhinoscope, by bending the wire stem to reduce the angle of the mirror, and fitting it to follow the curved line of the tongue.

The tongue must be depressed and held firmly, so as not to obscure and prevent a perfect exploration. Ulcerations, polypoid growths, and other abnormal conditions may, in this way, be distinctly located.

It is often difficult to get a perfect view of the posterior nasal cavity on account of not being able to use a mirror of sufficient size, and possibly upon the first trial the operator will be unable to see anything he is looking for, but should try until he can successfully manipulate the instrument.

If we are to make any improvement in the treatment of these troubles, it is of the first importance that we know the exact conditions of the parts; no "guess so" will answer here. If we find a part in an active state of inflammation, it is plain that we should use a sedative; should we find a foul ulcer, we need some stimulant anticeptic to cure. Other conditions demand other remedies. Then, again, if we cannot put the local remedy upon

the diseased surface, we had better tell the patient honestly that we can do nothing for him.

The many catarrh snuffs, with high sounding names, are frauds of "the first water." Nor, in fact, have I ever seen much benefit derived from any decoction inhaled or snuffed up the nose. Look at the anatomy of the part, and try to imagine how you could apply medicine to the superior portion of the cavity by this method. It must follow the current of air, which passes along the floor of the nose and into the throat. By the use of the atomizer we can apply any liquid to the diseased surface, in the best possible manner. When the discharges show a high catarrhal condition, the first favorable results may be obtained by the use of tincture of pulsatilla, gtts. 10 to 15 to water, oz. 4. We may add a few drops of aconite; or, if the pain is severe, with sneezing, etc., a small quantity of cocaine may be incorporated. With this we spray the nasal cavity and pharynx as often as the severity of the case demands—probably four to six times a day—continuing its application two or three minutes each time. Other remedies may be made use of with the atomizer, after the inflammation is sufficiently overcome—such as the distillate of hamamelis, colorless extract of hydrastis or pinus canadensis. Salt and water should never be used, unless the discharges are thick and yellow, showing a demand for a stimulant application, and then care should be used not to get it too strong. When the secretions are very profuse a powder, by means of the insufflator, consisting of sub-nitrate of bismuth and bi-carbonate of soda; but should never be used under other conditions. When the throat is dry, and the patient complains of the parched condition, I have often relieved by a few small doses of atropia—3*x* (third Homœpathic trituration, or one part to the thousand).

Whether this remedy cures by the law laid down by Hahneman I know not, neither do I care only that the patient *is* benefited and pays his bill. We should also make use of some mild alterative to facilitate the renewal of tissue as fast as possible.

In selecting remedies, do not use the common drug store nastiness, but get the best, and be sure of the results. It should not be forgotten that the patient, after obtaining relief, should take care of himself, as the same cause will reproduce the trouble.

WHY are Patent Medicines on the increase? Doctors may solve a problem of manifold interest by giving this subject a critical and impartial investigation. There is a rapid increase in the manufacture and sale, both in this country and England, and, as we learn, in France also, of patent medicines.

ELECTRICITY IN MEDICINE.

PAPER NO. 5.

BY G. W. D. PATTERSON, M. D., PHD., ATLANTA, GA.

The circuit means the path the electricity travels from its generation within the cell to its return to the same, and includes, first, the generating or active plate in the fluid; then the exciting fluid, through which it travels to the receiving or inactive plates; thence up this plate to the binding or connecting post; thence along (in the Galvanic Battery) to a conducting cord or conducting medium to another conducting cord connected to a binding post on the active or generating plate. (In this explanation of terms used I am confining myself as closely as possible to their meaning as applied to, and in connection with, medical electricity.) Thus, as stated, we trace the path from the development of the electric fluid to its return to the point of generation. Electricity thus traveling in an unbroken current through the circuit is called a closed circuit. If the current is broken at any point, then the electricity ceases to pass, and the current is spoken of as an open circuit.

Here is another point of difference as between the Galvanic and the Faradaic currents: The galvanic, as already stated, is a continuous current, and flows uninterruptedly, and when broken, electricity ceases to be generated, and continues so until the circuit is closed, which must be done by some means not connected with the battery itself. The Faradaic, as its name implies, is a circuit that is being continuously opened and closed—necessary to induction. This opening and closing of the circuit is accomplished by means and appliances included in the circuit and a part of the battery itself. These appliances will be named and explained as we proceed to describe batteries.

A circuit outside of the cell, and its elements, can be composed of one element or any number of elements, and these elements may be different in their organism, but must all be conductors of electricity, else the circuit is an open one; and these varying conductors must be connected, or, again, the circuit will be an open one.

A short circuit is where the elements of the battery communicate directly with one another out of the exciting fluid, or are connected by a short wire. All others are long circuits.

Bearing in mind the definition of terms that have been given

a fair use of the battery may be obtained, and the remaining papers comprehended.

The circuit, like the magnet, is made up of sections—each section or part having a positive and negative end, as a magnet is composed of a number of magnetic sections, the positive of one section joining the negative of another; so, in the circuit we must conceive that the smallest portion has a positive and negative atom immediately in advance, and the negative in contact with the positive of the one preceding it.

Starting from the positive pole of the battery, until we reach the negative pole, every conductor that may be in the circuit, including the patient himself, is composed of electrical molecules, having a positive and a negative atom so arranged that each positive or negative atom joins or is connected immediately with the opposite or unlike atom of the adjoining molecule. Thus the positive atom of, say, the fifth section or molecule would join the negative of the sixth, and the negative of the fifth would join the positive of the fourth; so the positive of the sixth would be joined to the negative of the seventh, and so continued through the circuit.

We may divide the circuit into few or many portions, and this rule is invariable. Taking the cord attached to the positive post of a battery, as a section, and inserting the disengaged end into the negative post, this cord becomes a part of a closed circuit—its negative—and is that joining the positive post, and its positive end that joining the negative post. Suppose we take two cords—one attached to each post—they have the same relationship. We call the one attached to the positive post the positive cord, and the other the negative cord. If we bring the two disengaged ends of the cords together the circuit is closed, and positive joins negative; if we interpose another conductor between the two cords, the patient, and starting from the positive post and calling the positive cord section 1, the patient section 2, and the negative cord section 3, the negative end of No. 1 joins the positive post of the battery, whilst the positive end joins the negative of No. 2, the patient, the positive of No. 2, the patient, joins the negative of No. 3, whilst the positive of No. 3 joins the negative post of the battery. We will find that this holds good in the battery itself when we come to discuss it, with its component parts.

We thus show a complete circuit of positives and negatives,

and all conductors are composed of electrical molecules arranged as demonstrated; so the wire, the elements, the fluid of the battery, and the patient himself, in fact all material, be its nature what it may, are but portions of the circuit, yet complete in itself as to its electrical elements. This paper, concluding the explanation of terms, I deem sufficient to understand what is to follow. I shall, in my next, take up the Battery itself, and try to explain its parts and its workings sufficiently to enable even a tyro to handle and care for, and even remedy any slight defects in its operations.

SECRETION AND EXCRETION.

These functions owe their energy to the epithelium of the gland; 2. to the enervating influence of certain nerves that enter the gland. Each glandular structure has a special epithelium endowed with a specific function. This function seems to be centered in a specialized power or energy that enables the epithelium of each special gland to withdraw from the blood that supplies the anatomical elements of its structure, the nutritive material from which the products of its secretion is fabricated.

Foster says, while treating on digestion: "The protoplasm of the secreting cell lives upon its 'internal medium,' the lymph filling the lymph spaces, by which the alveolus is surrounded, the lymph being constantly renewed from the blood-stream. We have no reason to think that the main nutritive constituents of the lymph in the interstices of a gland are different from those in the interstices of a muscle; but are led to believe that the same substances are built up in the one case into muscular and in the other into glandular protoplasm by the specific activity of the already existing protoplasm, which is different in the one case to the other. The cell substance, which has thus built itself up out of the lymph materials, sooner or later breaks down again; the constructive metabolism is inevitably followed by a destructive metabolism. In this downward path are probably many steps, two of which become conspicious; the formation of some intermediate product or 'mesostate,' as we may call it, such as zymogen or mucigen, and the conversion of the zymogen into an actual ferment or the mucigen into mucin, that is of the mesostate into a final product, which is discharged as a constituent of the secretion."

The epithelium therefore is the essential mechanism in the acts of secretion and excretion, yet we find that the sympathetic nervous system exercises a vital and important influence on the essential features belonging to these functions.

The supply of blood to the gland, whereby its anatomical elements are nourished and its epithelium supplied with the raw material out of which it mauufactures its products, is under the control of the nervous system. In point of fact, we find all glands, so far as we know, are supplied by two sets of nerves, each in function differing from the other in certain essential vital influences. One set of nerves seem to exercise their influence wholly on the arterioles either as vaso-dilators or vaso-constrictors thus increasing or diminishing the supply of blood to the gland. The other set of nerves seems to exercise influence altogether on the functionation of the epithelium; and here, also, we find one set having the power to excite and even to augment the functionation of the epithelium, and the other set to inhibit or even arrest the functionation of the epithelium without perceptibly controlling the action of those nerves that govern the vascular supply.

The mechanism that controls the secreting cells is essentially complex both in anatomical relation and in reflex function. Taking the salivary gland as a guide in our studies of secretion in general, we find that it is supplied with nerves from two sources: 1. From the cervical sympathetic, which accompanies the submaxillary artery in all its ramifications; 2. From the seventh pair of cranial nerves, the fibres of which, running in the chorda tympani, join the lingual branch of the third division of the trigimenus, (the fifth pr.) from which they diverge under the lower jaw, and thus supply the duct of the gland.

Pfluger, in describing the course of the secretory nerves in this gland, says the axial cylinder terminates in connection with the nucleus of the secretory cell; that some of the fibres also end in *multipolar ganglion* cells, which lie outside the walls of the acini, and these send their branches to the secretory cells of the acini. He further believes that those fibres that enter the acini directly are cerebral in origin, and that those with ganglia in their course are of sympathetic origin.

When we analyse the facial or seventh pair we discover that it contains two kinds of fibres: (*a*) excito-secretory fibres, (*b*) vaso-dilator fibres. The sympathetic also contains two kinds of fibres similar to the facial.

Bernard has shown us (*a*) when the chorda is cut, the arterioles and capillaries contract, the gland seemingly being under the unantagonized influence of the sympathetic; (*b*) when the peripheral end of the chorda is stimulated, the arterioles and capillaries dilate and are full of blood, the veins are turgid and pulsate; four times more blood pass through the gland at this time, while the blood in the veins is crimson in color. At the same time, a profuse, watery secretion of saliva, very poor in organic constituents, is poured out into the duct. This experiment might lead us to say that vaso-dilator and secretory function of the chorda are one and the same. Not so, for Vulpian has showed us if a certain quantity of curara is carefully injected hypodermically into the animal, the secretory function is at once set aside without interfering with the vascular function of the gland.

Heidenhain has also shown that nicotine prevents the secretion of the submaxillary gland without disturbing the vaso-motor function. Again, we know now that when an animal (dog) is brought under the full influence of atropine, daturine, hyosciamine, etc., the activity and secretory fibres of the chorda as extingushed, but the vaso-dilator functions are left untouched. This tells us that these medicaments have acted on the secretory functions of the nerve so as to paralyze it as long as their action is continued in force. Heidenhain has shown us that while these medicaments were acting, if the sympathetic branch that supplies the gland be stimulated, the secretion will be at once restored. Heidenhain has further showed us that hypodermic injection of pilocarpin will restore the secretion of saliva after it has been arrested by a atropine, etc.

The saliva secreted under stimulation of chorda is thin and watery, containing but little of the organic constituents, while the inorganic constituents, including the watery part, abound largely.

The behavior of the sympathetic under the influence of direct stimulation is the reverse of the chorda. The arterioles contract, there is diminished flow of blood through the gland and the secretion is considerably diminished in quantity, but very *rich in the organic* constituents of the saliva. If immediately after stimulating the sympathetic the chorda is stimulated, the result is a copious flow of saliva, rich in the organic constituents of the gland secretion. This fact demonstrates that the sympathetic

is the nerve that animates the activities of the protoplasmic elements of the epithelium and stimulates their vital action (the manufacture of mucigen, etc.) while the chorda stimulates the mechanism that withdraws the watery part from the lymph and washes the saliva out through the duct.

The reflex function of the secretion is plainly established. Thus the lingual (being a branch of the fifth) and one from the glassopharyngeal, receiving impressions made by the food, acts as the afferent nerve, whereby the sense is conveyed to the centre, which lies in the medulla, the efferent impulse to the gland is conveyed by the chorda tympani, and, also, we believe, to the sympathetic through anatomisis with a branch of the vagus. Stimulation of the gastric mucous membrane causes a flow of saliva; the odor of viands makes one's "mouth water" when hungry.

Stimulation of the medulla, also of an efferent nerve, like the sciatic, do cause a flow of saliva. This latter must be brought about through a very complex series of reflex paths. The centre (reflex) for the secretion lies in the medulla, near the origin of the seventh and ninth cranial nerves; the centre for the sympathetic fibres also lie about that point in multipolar cells. The secretion is very considerably excited in mastication, and a hungry horse will secret four to six times more saliva during the first half of his meal than the second half. Evidently the keen sense of hunger being a strong additional stimulous to the secretion.

On turning to observe the structural changes that take place in the substance of the secreting gland, the following phenomena are observed: On closer investigation of the vital phenomena of the secretion of saliva it is found that the pressure of the discharging duct is equal to eight inches of mercury, while the pressure in the carotid artery at the same time is only equal to four and a half inches of mercury; hence, from this difference in pressure we learn that the force that drives the secretion outward must originate in the gland itself, which we locate in the vital activity of the epithelium of the cells, and cannot be owing to the blood-pressure in the arteries.

Experiments show that the sympathetic, in a way, controls the quality of the secretion—its richness in organic elements—as already presented. It seems that this nerve presides over and governs the morphological functions of the gland and is there-

fore intimately associated with the vital energy of the protoplasm of the secreting cells, for we find that increase of the blood flow (chorda stimulation) is secondary to the vital act of secretion, for this is proven when atropine, or physostigma, or curaria, etc., is injected into the blood the secretion is arrested. Yet, the hyperæmia still appears when the chorda is stimulated, but can be restored by stimulating the nympathetic.

If we turn to the morphological changes that go on in the anatomical elements of the gland itself we note the following facts: During rest, the substance of the cells is pervaded by fine granules, which are so numerous as to obscure the nucleus while the outline of the cells are indistinct. None, or very little, of the protoplasm of the cell is visible and carmine has no effect in staining the minute elements found in the substance of the cells. It seems that the protoplasm of the cell has been spent in creating (if we may use the word) the peculiar organic constituents of the secretion and nothing is left of it but a minute matrix from which it can restore itself. Now, carmine stains pure protoplasm and not the granular protoplasmic contents of the cell; hence, the dye stains the minute spot of remnant protoplasm. When the gland has been made to secrete by stimulation of the sympathetic, we find that in proportion as the contents of the cells have been discharged the material stainable by carmine is considerably increased in quantity, that is, the matrix restores the protoplasm again ready to work up more organic constituents of the secretion. These phases alternate between rest and activity. Thus we say the secreting energy lays in the protoplasm of the cell.

We have selected the salivary gland as a type of secretion because we know more about it in all its phases. We have no reason to believe that other glands differ in any essential particulars in their physological functionation from the salivary. In point of fact, we find how complex the nervous supply and functions are to secreting glands, we may judge of the remarkable and independent action of the epithelium, whose profound vital function changes this tissue, in various locations, bring about and works out of the common to all raw material, the lymph.

The increase of blood supply is apparently only secondary, the epithelium alone fabricates the special material.

PROTRACTED TOTAL FASTING

and herb tea drank during the period of abstinence from food, together with the remarkably well preserved and apparently inexhausted state of the experimenter at the end of his feat, is the latest sensation in European medical and secular journals. The subject of a thirty-day *bona fide* fast is Signor Succi, of Rome, and was undertaken to convince the public of the efficiency of his herb liquor as a life sustainer, and which the Signor liberally partook of, very probably instead of simple water in the main. The first three days of the seance was passed in bed, after this the Signor rode on horsebak and took vigorous exercise every day nearly. At the end of his fast, Succi was apparently in a vigorous state of physicalwell being. It will be recollected that Dr. Tanner's fast lasted forty days. At the same time we recall that Tanner was wretchedly emaciated and weakened, but the Signor was in an excellent state of preservation. How he would have fared had he stuck to his fast ten days longer we are unable to say, but probably not much the worse off.

The point of interest deserving of note in Succi's case is, that his herb tea did have a remarkably preservative influence on the metabolism of his body, for he could not have been much weakened, as he is reported to have taken, during the continuance of his experiment, vigorous and even violent exercise. That his abstinence from nourishing food, in the sense the popular mind regards it, is well attested by competent witnesses.

Now, we call attention to the fact that his teas contained vegetable salts of various kinds: some glucose, minute it is true in quantity, so of starch, but more particularly of alkaloidal compounds having nitrogen in their chemical construction.

This little item points us to the fact that the old method of treating diseases with teas was one that had a large moiety of scientific basis in it, for we know by experience and the records of the past how very many patients, young and old, male and female, went splendidly through protracted acute diseases under this kind of treatment. In such cases these teas acted as food as well as medicaments, and, therefore, carried protection along with the cutting edge of therapeutic action. We recall many destructive epidemics of various diseases one time and another in our experience; how savagely murderous the best Allopathic treatment always was, but nevertheless was the success

of the early Eclectic physicians in the treatment of those diseases during the same epidemic, strongly brought out by recoveries in ninety per cent. of their cases. Herb teas have a much larger range of usefulness and infinite curative properties when administered under scientific guidance than the average doctor of to-day is willing to accord. It is reported by good observers that herb teas are very much in vogue with French physicians even in these days of exquisitely perfect pharmacutical abstracts, alkaloids, extracts, etc.

ABSTRACTS.

BICHROMATE OF POTASH.—Dr. A. Drysdale: Bichromate of potash has a specific action upon, or elective affinity for, certain organs, and tissues analogus to, and even more marked than that of arsenic or mercury, and hence it may be hoped that it may prove as useful a thereapeutic agent as those powerful substances. This action is most marked on the mucous membranes of the respiratory passages, nose, eyes, and mouth, and on that of the stomach and intestines, on the skin, liver, and kidneys, and lastly, the fibrous tissues, periosteum, and bones. No specific relation can be traced with the serous membranes, with the genital organs, or cerebro-spinal system. The effects upon the nervous system, greatly dwelt upon by Priestley, may be placed upon one side, as they are manifestly secondary to the violent effects produced by the direct contact of large quantities of the substance with the mucous membrane of the stomach, etc. When the drug is given in smaller quantities, and its action distributed over a larger period, no symptoms referable to the nervous system are observed. As it is evident that, in order to benefit a malady (unless the treatment is to be purely empirical), the remedy selected must at least be known to affect the seat of the affection, the sphere of usefulness of bichromate of potash must be sought for among disorders of the above-enumerated organs, viz.: of the mucous membranes of the respiratory passages and alimentary canal, the liver, kidneys, skin and bones. Though it is not a remedy as yet in general use, there is a considerable amount of information forthcoming with regard to its beneficial action in scrofulous eczema, equino-farcy, digestive disorders, marasmus and syphilis. Cases are met with chiefly in persons

about the age of puberty, or somewhat younger, in which there is a troublesome muco-purulent discharge, great tenderness of the septum nasi, with occasional pain, and a swollen condition of the nose; such cases will yield readily to a few weeks' course of bichromate of potash. Obstinate persistence of polypi, after recourse to the usual remedies, and after repeated removal by the forceps, yielded to the topical action of a snuff composed of nine parts of sugar and milk to one part of powdered bichromate of potash. The polypus begins to atrophy at once, and after a course of a couple of months, entirely disappears, never to return.

Mr. James Moore reports comparatively good results from the administration of ½ grain in horses affected with glanders; he also rubs a lotion over the inflamed glands, and causes the horses to inhale a steam containing 5 grains to a quart of water.

About the month of June, some persons suffer greatly from coryza, dull headache, creeping and tickling in eye and nose, with watering, sneezing, and tightness of chest. Such a condition known as hay asthma is much benefited by bichromate of potash.

Ulcers of the tongue, either syphilitic or non-syphilitic, have disappeared under its administration. Those kinds of acute sorethroat where there is not much redness or swelling, but which tend towards the speedy formation of small ulcers on the tonsils and velum, will be found to be greatly benefited by the administration of the drug. A gargle of gr. ii. to ʒ of water, and ʒ ss. of glycerin may be used with benefit in all cases of acute ulcerated sore-throat. In some persons of fleshy and leuco-phlegmatic habit, usually children or old people, there is a tendency to indolent enlargement of the tonsils and deafness. Such cases are well treated with bichromate of potash. This drug has been found beneficial in a variety of forms of dyspepsia and functional derangement of the stomach, as well as in chronic inflammation and duodenitis, atonic dyspepsia with flabby tongue, loss of appetite, and uneasiness of stomach. Vulpian says: "Those cases of dyspepsia in which bichromate has appeared to produce very good effects are those in which we might ask ourselves the question whether we had not to deal with neoplastic developments of the mucous membrane of the stomach." He puts such patients on a milk diet and gives them the pills of the bichromate, commencing with gr. ⅙, three times daily, and gradually increasing to nine pills.

Some varieties of acute and chronic inflammation of the duodenum, and many of the cases of spasmodic pain simulating the passage of gall-stones, yield readily to this drug. Chronic catarrh of the mucous membranes of the bowels, with flatulent colic and constipation, and even those cases (dysenteric) in which there is chronic beefy red tongue, frequent loose stools, with circumscribed tenderness of the abdomen, have been beneficially treated with bichromate of potash. Very great benefit has been found from its administration in those cases of dysentery after severe burns, probably to be referred, as was pointed out by Curling and Long, to ulceration of the duodenum. Of 137 cases of syphillis treated with chrome water, sixty-seven abated with no symptoms subsequent to primary sore; in fifty-six, secondary and tertiary symptoms were cured without relapse, while in seventeen cases there was no relapse. These results are more favorable than those obtained under mercury.

It is to be hoped that the bichromate of potash in syphilis will yield sufficient results to enable us to differentiate those cases which would be best treated by it from those best treated by mercury.—*Med. Press and Circular, April* 18, 1886.

TELA ARANEÆ is, according to Dr. C. Pierce (in Eclectic Medical Journal), a powerful sedative to the sympathetic system and a soother to excited states of the cerebro-spinal centres and nerves and also of reflex excitements of sensory nerves. Its specific indications are, viz: Masked periodical diseases in hectic, broken-down patients; in all diseases that come up suddenly with cool, clammy skin and perspiration, cool extremities; in nocturnal orgasm in either sex; numbness of the extremities while sitting still or lying down. It relieves spasm of the arteries and stimulates the capillary circulation. It relieves hyperæsthesia of the cerebro-spinal and the great sympathetic system of nerves that depends upon debility. It is the greatest heart stimulant in the Materia Medica, and lobelia is second only to it. According to the description of the cases reported by Dr. Pierce, in which tela was used successfully, its action appears to be decidedly anæsthetic to hyperæsthetic states of the garglionic system and the nerve-ending of its branches. Every observant physician is aware of the numerous cases that present this peculiar kind of super-excitation of the sympathetic, and the symptoms all point to overaction in sensibility and the regulative functions. Stick a pin here for tela aran.

OIL OF GAULTHERIA AND SALICYLIC ACID.—Drs. Wood and Hare, hold (Thera. Gazette) that, oil of wintergreen in the system is converted into salicylic acid, and 169 grains of the oil of gaultheria, containing 152 grains of the methyl salicylate, should be equivalent to 138 grains of salicylic acid

Oil of gaultheria contains about 90 per cent. of menthyl salicylate, $C_7 \left\{ \begin{matrix} H_5 \\ CH_3 \end{matrix} \right\} O_3$. One equivalent of hydrogen, H, takes the place of methyl, CH_3, and thus forms salicylic acid, $C_7 H_6 O_3$.

ON THE DRY TREATMENT OF CORPOREAL ENDOMETRITIS.—Dr. S. D. Booth, in North Carolina Medical Journal, August, 1886: With this "Endometric Duster" or uterine dry syringe, the author has treated many pathological conditions of the uterus and vagina by local applications of various powders. The apparatus is a modification of the ordinary blower used with insect powders. The clinical use of the method is set forth by the writer as follows:

There is a form of eruptive vaginitis in which the whole vaginal mucous membrane, including the lower portion of the cervix uteri, is covered with little pimples. This form of trouble is generally attended with a most provoking and ceaseless itching of the vulva, and the ordinary remedies seem to have scarcely any tendency to modify its harassing existence. I have known a single dusting over of the upper part of the vagina with a mixture of one part of nitrate of silver and twelve of bismuth alone, to the internal portion of the labia, to stop the itching and burning; and a second application made in like manner to cure the case entirely. I have treated a few cases of gonorrhœa with the powder thrower, and with marked success. In one case I used salicylic acid and morphia. In a small number of cases I have used bismuth, 30 parts, argenti nitras, 1 part, morphia sulphate, 2 parts, and these cases recovered more rapidly than I have known the disease to do under any other treatment; however, care must be taken that air is not thrown into the bladder, for the urine will be decomposed and cystitis set up, as I have seen happen in one case. While I am digressing, I must state that dysentery, in its early stages, might, with great advantage, be treated with the dusting arrangement. Nothing in this disease could be more salutary in its effects, it seems to me, than a thick coating of bismuth, containing a small amount of morphia,

or the iodides, and freely and frequently applied act more speedily in bringing about a favorable result than any other class of remedial agents which I have used in those troubles. In those cases of endometritis in which we see a glairy mucus, looking like the white of an uncooked egg, running from the os, and when little tenderness is manifested in passing the uterine sound, nothing has acted so well and with such gratifying results as the chlorate potash, rubbed to a fine powder and sprinkled freely over the membrane lining of the body of the womb.

ELEGANT WEDDING OF A HAPPY YOUNG COUPLE AT OPELIKA.—The elegant residence of Mr. J. M. McNamee, cashier of the bank of Opelika, was filled with relatives and friends this evening, the occasion being the marriage of his eldest daughter, Miss Rosa, to Dr. D. B. Williams, of this city. This event ends an engagement of four years. The bride is an accomplished young woman, was elegantly and costly attired and never looked lovelier than this evening, when, leaning upon the arm of her betrothed, she assumed the vows of marriage.

Dr. Williams is a young man of sterling qualities and is making for himself an enviable reputation in his chosen profession.

Promptly at 8:30 o'clock the bridal party entered the parlor where Rev. J. S. Rencher, pastor of the first Methodist church, pronounced the words which made Dr. D. B. Williams and Miss Rosa McNamee husband and wife. The attendants were Mr. D. A. Greene, of Birmingham, and Miss Mamie McNamee, of Auburn; Mr. W. W. Williams, of Opelika, and Miss Kate McNamee, of Opelika. After the ceremony the bridal party and guests repaired to the dining hall, where an elegant supper was in waiting.—*Mobile (Ala.) Advertiser.*

[The editor and publishers of the Georgia Eclectic Medical Journal send their congratulations and many wishes for long life, happiness and usefulness to the high contracting parties. Dr. D. B. Williams, is a graduate of the Georgia College of Eclectic Medicine and Surgery of the class of 1885–6, and the valedictorian on the occasion of the commencement exercises. Dr. Williams has warm and true friends in Atlanta who see in him qualities destined soon to make him eminent in the medical profession.]

SIGNS OF THE TONGUE.—The tongue is the indicator of the system. A white-coated tongue indicates febrile disturbance; a

brown, moist tongue indicates disordered digestion or overloaded *primæ viæ;* a brown, dry tongue indicates depressed vitality, as in typhoid conditions and blood poisoning; a red, moist tongue indicates debility, as from exhausting discharges; a read, dry tongue indicates pyrexia, or any inflammatory fever; a "strawberry" tongue, with prominent papillæ, indicates scarlet fever or rotheln; a red, glazed tongue indicates debility, with want of assimilative power of digestion; a tremulous, flabby tongue indicates delirium tremens; hesitancy in protruding the tongue indicates concussion of the brain; protrusion at one side indicates paralysis of the muscles on that side.—*The Pacific Record.*

FOR DIFFICULT, PAINFUL AND OBSTRUCTED MENSES.—This is worth remembering: Take a small handful each of the red cox-comb flowers (no seed) and the tops of the horse-mint, over which pour a pint of boiling water and set aside to draw and cool sufficiently to drink. Of this take two-thirds to one gill, warm, two or more times a day, as the case may require, at the time of the menstrual flow, and you will rejoice at the speedy result. The flow can be made much or little according to quantity and strength of the tea given. If persisted in at any monthly flow it will cure any case of painful and scanty menstruation, many cases of the difficult, and quite a number of the obstructed; and likely not a case will be found that cannot be cured, unless deformities or organic disorganizations exist. This remedy is new to many, and probably old to others, no matter which, it will do all I claim for it. The field is open for other employment for this remedy.

Cox-comb flowers alone or horse-mint, are good of themselves for these troubles, but when combined are unexcelled, aye, magical in their effects. Nothing of a helpful nature should be withheld from the busy practitioner, and the more simple it is, the better. Gentlemen this remedy is before you for your special benefit, not simply to be found in print or to show my name.—*Dr. J. Z. Taylor in Medical World.*

PEPTIC REMEDIES.—Dandelion blossoms, scrophularia nodosa (figwort), scrophularia Marylandica, asclepias syriaca are brought in review in an article in the Eclectic Medical Journal, by Jas. Rhodes Buchanan. The figwort, Prof. B. says, in addition to assisting the functionation of the stomach, has a gently soothing

and almost saporific influence, which makes one of my favorite prescriptions in all digestive disorders. In confirmed dyspepsia these four valuable articles may be greatly assisted by using the asclepias syriaca, or silkweed, which should be used in smaller doses than the others. It exercises its influence on the kidneys and liver, in which sense it is a true depurator; is valuable in fevers, but especially in dyspepsia, with great abdominal torpor. The scrophularia Marylandica has more of the properties of a soothing nervine than scrophularia nodosa * * * it has a beneficial influence on the liver, womb and cutaneous surface, and is beneficial to the skin when used externally and internally.

TO CONTROL AN HYSTERICAL PARYOXISM.—Hold the head of the patient securely between the palms of the hand while pressure is made with the thumbs over the supra orbital foramen. The patient contracts the facial muscles with an expression of pain, cry out, then take several quick, successive inspirations. The breath is held a few seconds, and then with a long expiration the muscles relax and the attack is ended. The pressure of the thumbs must now be relaxed, otherwise it may have the opposite effect and excite another convulsion. Pressure over the nerve trunk at this point, where it becomes superficial, will have the same effect, but the supra orbital nerves are chosen because of their convenient situation.—*Dr. Rualtt in Francaise Medicale.*

PRURITUS AND OTHER ITCHING SKIN DISEASES is well treated by rubbing on the affected parts pure balsam of peru. Rub it in well twice a day. A solution of menthol, 2 to 10 grains in the fluidounce of mentsrum, is recommended in these troublesome affections. Oil of wintergreen, either pure or diluted one-third to one-half with olive or cotton-seed oil, has been found a very efficient local remedy. In inveterate cases we suggest the use internally of tincture of gelsemium in doses of 2 to 5 gtts. every three to four hours till some of its noted toxic effects are slightly produced, and then reduce the dose or extend the intervals of administration. This, in connection with local treatment, will be found often very satisfactory in rebellious cases.

FOR NEURALGIA.—℞. Sol. ext. belladonna, sol. ex. hyoscyamus, aa x grs; iodide of manganese, 1 grs; iodide of zinc, vi grs. M. Make fifty pills, one to be taken every six or eight hours.

NEW METHOD FOR ANÆSTHETIZING THE UNINJURED SKIN WITH COCAINE.—Dr. Wagner, at the meeting of the Society of Physicians at Vienna, held February 5, 1886 (Wien. Med. Blatt), described a method by which the uninjured epidermis might be rendered anæsthetic through the application of cocaine. For this purpose he made use of the property of a galvanic current discovered by Dr. Hærtner, in consequence of which fluids move from the positive to the negative pole. If the positive electrode is dipped in a cocaine solution, and placed upon the skin, and the negative pole placed a short distance from it, and a current allowed to pass, the skin lying between these two points of application of the electrode becomes anæsthetic. Wagner made a number of experiments to determine the value of this method to surgical practice in the clinic of Professor Billroth, and found that by means of this such anæsthesia as would prevent the appreciation of incisions of the skin was readily attainable.—*Therapeutic Gazette.*

THE NEGRO FROM A MEDICAL STANDPOINT.—The negro is rarely or never myopic. Their only eye trouble is phlyctenular conjunctivitis. They rarely have granular lids. The negro bears surgery remarkably well. Syphilis in the negro is generally very mild. One-half of all negro men have syphilis, and it does not seem to hurt them. Gonorrhœ is easily cured in the male. In the female it does most harm, causing endometritis and sterility. The negresses often have uterine fibroids, but very rarely ovarian tumors. Uterine cancers are very rare, although lacerations of the cervix are very common. Insanity is rare.—*N. Y. Medical Journal.*

ALETRIS CORDIAL IN UTERINE DISEASES.—Case; age twenty-eight. Exhausting menorrhagia and complicated uterine disorder following instrumental delivery three years ago, prolapse leuchorrhœa, lacerated cervix, etc.; after trying many methods of treatment unsuccessfully she came to us discouraged and debilitated. We prescribed aletris cordial, commencing five days before the period, and she is not only encouraged but delighted with the decided alleviation of her symptoms. Flow much diminished in quantity and period shortened.

Case; Mrs. D., age thirty-five; ovaritis, painful and continued menorrhagia, after ten years history of medical experiments

and broken health. One-half teaspoonful doses three times daily for sixteen days has relieved every morbid condition to an extent that she regards her cure complete, and has discontinued treatment.

We report these few cases, thinking perhaps they may be of use by adding to experience with what we are inclined to believe a valuable medicine, and all the more so, as during the employment no other remedies were exhibited.

DRS. SILBEE & JONES.

No. 253 W. 8th St. Cincinnati, Ohio.

WM. E. BURNETT, M. D., Roland, Ill., says: Celerina, as now prepared (Rio Chemical Co.) far excels any other formula, as a nerve tonic and vital reconstructor that I ever used in my practice. It acted like a charm in two patients who came to me for treatment, one of whom was an old lady, fifty-five years old, suffering from dyspepsia of long standing; after the usual routine of remedies had been used to no effect, and having seen celerina recommended by some of the medical journals, I concluded to give it a trial. After using the mixture one week she began to improve, and to-day is in better health than for twenty-two years. Second case: By using celerina one month, I dismissed a patient cured, suffering from nervous exhaustion. I would not be without it in my office.

MENTHOL IN URTICARIA AND PRURITUS.—Among the myriad of remedies for these troublesome afflictions we have no other which affords such complete and instantaneous relief as a solution of menthol. We have used this remedy for urticaria in three cases. Not only is the itching relieved for the time, but a cure seems to be effected. In pruritus ani, and in eczema, moistening the parts with menthol solution causes an immediate cessation of the pain. The solution should contain from 2 to 10 grains of menthol to the ounce of water.—*Buffalo Med. and Surg. Journal.*

"C. C. CASTOR OIL" is the name of a cheap adulterant offered the wholesale trade by a firm who are anxious for the trade to make a better profit on this physic and lubricant. We suppose the full name is "cussed cheap castor oil." We advise retailers to test their castor oil, as this new brand may be on the market.—*National Druggist.*

SOUTHERN ALLOPATHY PAR EXCELLENCE.—Dr. J. H. Crawford, Fort Valley, Ga., writes to the Medical World: I will state that if Dr. Jennings will try 20-drop doses of chloroform in gum-water every four hours for a day or two, he will relieve his patient entirely (for the time) of albuminuria. Repea tas often as it appears in the urine. Hold her up well with full doses of tincture of iron and chlorate of potassa, and she will make the trip safely. When convulsions come on, bleeding from both arms as much as can be borne is considered the sheat anchor of safety among the best physicians of the South.

HOW TO MAKE A BANDAGE FIT.—Dr. N. M. Folsom, Portsmouth, N. H., in Medical World, says: I notice that none of the writers on post partum bandages mention the process of fitting them to the patient. A strip of strong cotton cloth, wide enough to reach from the lower end of the sternum to the great trochanters, with a suitably wide *gore* against each hip, will make the bandage sit steadily, if it is put on smoothly and tightly.

I always apply the bandage in such cases, feeling that it does good both physically and morally.

ETHER SPRAY IN REDUCTION OF STRANGULATED HERNIA should always be thought of before resorting to ulterior measures. Dr. George R. Fellows, of Maine, adds his testimony to the efficiency of this means in facilitating the reduction. He has had, he says, wonderful success with it, the hearnia generally disappearing spontanously or under very slight pressure.

SOZOLIQUE ACID is a chemical compound resulting from mixing equal parts of strong sulphuric acid, carbolic acid is soluble in water in all proportions of alcohol and glycerin. It is less caustic than carbolic, but more acid, and has great antiseptic properties, though not poisonous (?). The 1 to 1000 strength of solution is sufficient for ordinary purposes, and it may be two or three times stronger.

HOANG NAN is again being brought to the front as a remedy in hydrophobia. Lesserteur claims to have administered the drug in over one hundred persons bitten by mad dogs, in none of whom did symptoms of hydrophobia appear. This is about as good a record as Pasteur has made with his inoculations.

"The Roman soldiers, who built such wonderful roads and carried such a weight of armor and luggage as would crush the average farm hand, lived on coarse brown bread and sour wine. They were temperate in diet, regular and constant in exercise. The Spanish peasant works every day and dances half the night, yet eats only his black bread, onion and watermelon. The Smyrna porter eats only a little fruit and some olives. He eats no beef, pork or mutton, yet he walks off with his 800 pounds. The coolie, fed on rice, is more active and can endure more than the negro fed on fat meat. The heavy work of the world is not done by the men that eat the greatest quantity. The fastest, longest-winded horse is not the biggest eater. Moderation in diet seems to be the prerequisite for endurance."

[GERMANE to this subject is the recent statement of a distinguished physician of Louisville, Ky., Professor Yarnell, that he passed through an attack of typhoid fever with a sad recollection of the disgust that over-feeding caused him. He took food—did not want it—would not take it when he could avoid it; that he did much better when not subjected to the painful annoyance and disgust unwanted food caused him. There is much food for reflection, and our guidance in this experience of Professor Yarnell. Undoubtedly fever patients are often fed much more than their digestion and assimilating organs can dispose of, and then the excess must become a dangerous source of depression—a veritable acute dyspepsia, in some patients, must be a great source of danger.]

THE INNER SURFACE OF THE WOMB AFTER LABOR.—Dr. Braxton Hicks, at a meeting of the British Medical Society, called attention to a peculiar condition of the lining membrane of the womb contracts after delivery. When the womb contracts, this membrane is thrown into folds, and sometimes so loosely attached to the muscular portion of the uterus as to be readily moveable. If the membrane be thick and contain inflammatory nodules, it may be easily mistaken for an adherent placenta. Dr. Hicks made such a mistake once, but discovered the error before any harm was done.

ROTHELN, DIAGNOSIS OF.—The earliest symptoms discernable is a swollen gland in the neck at the back of the sterno-mastoid muscle, which is noticed four or five days before the rash appears in German measles, called "Rotheln."

EDITORIAL

MURIATE OF AMMONIA.

In the old books on Therapeutics and Practice this medicament is recorded as having powerful action on the glandular system, notably the liver. More recently it was set down as a neurotic remedy of great certainty. Twenty years ago it was largely used by Eclectics in pneumonia and pleurisy, in the belief that it acted on the fibrinosity of the blood and so prevented heavy plastic exudations. All the above statements are founded on therapeutic facts and clinical experience; but, at the same time, the medicament was used rather indiscriminately.

Muriate of ammonia is a powerful vaso-motor stimulant, on the one hand; on the other it is anæsthetic to over-excited nerve centres, especially those of the ganglionic. When a nerve is in connection with ganglia in direct anatomical relation, muriate of ammonia will be found a curative medicament of pain and over-excitement of that nerve and its branches. It is remarkably certain in neuralgia of the fifth pair of cranial nerves or of any of its branches; hence the pretty frequent success of full doses of the medicament in trifacial neuralgia. It has been noted that neuralgia of the eye attended with heavy congestion of the conjunctiva and often of the sclerotic, photophobia, etc., muriate of ammonia is specific when the doses are large enough to extend the anæsthetic influence over the ganglia and root of the fifth pair. In liver troubles this medicament was once pretty popular with physicians. In point of fact, we find the vaso-motor functions of the nervous system to be largely excited by many accidents in the processes of assimilation. Whatever excites the circulation of the liver is sure to increase the activity of the protoplasm of the hepatic cells; hence, there are given out as consequences excess of urea, of bile, of cholesterine. The over-tax on the protoplasm reduces the excellence of functionation; hence large quantities of half elaborated nitrogen products derived from the alimentary canal are thrown into the blood, while, on the other hand, the depurating energy of the hepatic protoplasm is correspondingly lowered and a vast amount of effete material is retained in the blood, producing a true choleseræmia, including retained bile acids, which act so detrimentally on the metabolic

functions of the tissues. Besides these, we may mention the effect exercised on the functions of the ganglion centres, thus lowering the controlling influences they have over the activities of the metamorphic functions. Muriate of ammonia clears up these ills, soothes the excitement, stimulates the vaso-motors and cures the congestion or engorgement of the vessels.

In the pain and cough of pneumonia, muriate of ammonia was frequently used with great success. Old Eclectics claimed that the medicament did exercise marked influence in controlling and limiting the extent of exudation usually poured out in this disease, and that what was exuded was more quickly removed under the therapeutic action of the medicament in proper doses, administered at suitable intervals. In the so-called dry pleurisy the terrible pain is almost killing, but soon comes under the curative influence of this medicament, in full doses.

In the low state of the system known as ataxic typhoid, muriate of ammonia is found highly useful, because it really increases blood pressure, energizes ganglionic centres and promotes assimilation and nutrition. The vaso-motor centres are no doubt largely stimulated by this medicament.

On the cord it seems to have no direct action, save as the grey cells may be sedated and reflex excitement soothed, but it has no action on pure spinal sensory nerves. In some cases of dropsy occurring from liver disease, muriate of ammonia has done remarkably well, and has worked finely combined with pure tonic bitters. It may be regarded with some degree of certainty that muriate of ammonia exercises a marked curative influence on chirrosis of the liver, and the dropsies occurring therefrom. Long ago it was noted by Eclectic clinicians that ammonia muriate, combined with podophylin and quinine, was more certain to remove the dropsy of liver disease than the latter two were without the aid of the ammonia muriate. This medicament has considerable influence on the functions of the pneumogastric and the tissues it supplies. This is to be inferred at once, seeing that this nerve has three ganglia, and is intimately related by anastomosis with other ganglia. We know how excitation of this nerve causes congestion of the liver, its functions to the liver being something similar to that of the chorda to the submaxillary gland. Diabetes results from such excitation, and when it is owing to this, muriate of ammonia has been found of value.

Another valuable therapeutic property of this medicament is its action on the capillary bronchi and air cells of the lungs, for we have found it of noted efficiency in the so-called capillary bronchitis of children, a very dangerous disease, when involving a large territory of the lungs on account of the asphixia it is sure to induce. The inflammation is of the plastic kind which occlude the lumen of the tubes. Small doses of ¼ grain every hour most frequently causes a thinning of the exudation, which is easily coughed up; at the same time the inflammation is at once modified and soon removed. The dose of this medicament ranges between 30 grains to 40 grains, the maximum, to ⅛ grain, the minimum. In atrocious neuralgic of the fifth nerve or its branches, the dose must be large and repeated at short intervals to obtain direct action. As an alterative in liver and splenetic diseases, the dose may be 2 to 3 grains several times a day. Infants should have small doses, often repeated. We frequently give it in an infusion of sassafras tea or licorice root, and the comp. aromatic elixir of licorice will be found an excellent disguiser of the disagreeable taste of the drug.

The following formula will be found of great service in practice: ℞. Ammon. mur., ʒ i; sulphate of quinine, ʒ iss; acid hydrochloric, dil., ʒ i; sodium chloride, ʒ ij; tinct. mnriate of iron, ℥ i; glycerine, ℥ i. M. Dose from 20 drops to a teaspoonful in half a tumbler of water three to four times a day. Valuable in chronic ague, jaundice, chronic chirrosis of liver.

℞. Ammon. mur., ʒ ij; comp. tinct. cinchona, ℥ iv. M. S. 20 drops every two hours in chronic bronchitis.

℞. Ammon. mur., ℥ i; water Oj; slowly drop in aquæ ammonia ℥ ss; turnpentine, slowly added, all that can be taken up without showing cloudiness. This makes a very valuable liniment in chronic myalgia and muscle pains generally.

We have found muriate of ammonia and powdered hydrastis aa ℥; hot water, Oj; a valuable recipie in chronic dyspepsia. A drachm or two of hydrochloric acid dilute may be added, which will be of service in cases of tardy stomach digestion. In point of fact, we find the digestion in the duodenum is very tardy when hepatic congestion obtains, which may be readily supposed, because the endosmotic passage of fluids from the intestines with the portal blood is retarded so that duodenal catarrh must be the result. These cases are associated with impaired portal digestion, which results in sending much illy elaborated blood into

the system at large. Muriate of ammonia has frequently done wonders in these cases.

This medicament will be found of value in the treatment of chronic metritis and the resulting neoplasms of its tissues. We have seen the symptoms steadily fade away under it; the hyperplasia seems to be dissolved and removed, leucorrhœa ceases and health returns. We must recognize in this medicament a powerful alterative as well as a cholagogue. We have seen the diarrhœa, sordes, dry, beefy raw tongue, all better under its influence in typhoid fever. In such cases, the dose should be 1/8 grain every hour. It stimulates and strengthens a weak heart. It also has some influence in causing cessation of the appearance of albumen in the urine.

TYPICAL RELATIONS OF THE VASO-MOTOR MECHANISMS IN DISEASE.

The actions of nearly all poisons that produce disease is primarily to stimulate the vaso-motors and induce high blood pressure, yet they inhibit the vagus, and so the heart is quickened, but the increase of heart beats in the ordinary cases is progressive as to time, the frequency increasing little by little from day to day until an approaching maximum is reached. When the dose of poison is moderate the blood pressure is not very high, yet high enough to insure an after paresis of the vaso-motors, which is also gradual, and the strong pulse that was noticed in the outset slowly gives way to one more weak and soft in character. On the other hand, when the dose of poison is considerable at the outset, it rapidly aguments both in quantity and effect, and the vaso-motor stimulation is of short duration, soon followed by vaso-dilution, which rapidly causes increased frequency and weakness of the heart's action; the pulse is small owing to the vast amount of blood in the capillaries, which in turn affects the heart in two ways, (*a*) by diminishing the quantity of blood that reaches the heart at each dilatation of the ventricle so as to cause this organ to miss its accustomed stimulus of a full ventricle; (*b*) its muscular structure suffers from deficiency of nutriment and soon weakens; hence the weak first sound in grave cases. It may be set down as a fact that when a weak first sound occurs early in any case of *heat* disease, the the case is sure to be grave in nature. The nature of all animal poisons (zymotic) is to produce paresis of the vaso-motor cen-

tres and thus enlarge the vascular areas of the system. With this is sure to be weak heart systole, and these together are sure to cause defective capillary circulation. We know for a fact that the quicker the blood passes through the capillaries the more perfect is the nutrition of the tissues and the better are effete material removed.

Fever Heat is associated with paresis of the vaso-motors inasmuch as the production of heat in the organism is under the control of some central mechanism, partly in the medulla and partly in the cord, and which is in some way associated with the vaso-motor mechanism, both of which are considerably inhibited by the causes that induce high temperature. In some way, the destructive metamorphosis of the body are much enhanced, so that increase of urea, bile acids, cholesterine, etc., are found in the excretions. But, singular enough, under the influence of the poison, the distructive activity of the liver cells on the red globules of the blood is considerably enhanced, which of itself is sufficient to account, in considerable part, for increase of urea, for we find that this quantity of CO_2 does not keep pace with the augumented quantity of urea.

During fever all the glands undergo metamorphic destruction; that is, their protoplasm wastes, which is owing to the vaso-motor paresis of the blood supplying vessels, yet the functionating energies of these glands, save the liver, is in abeyance. This is one source of urea also.

The medicaments that control fever heat are those of decided vaso-motor stimulating action. Quinine stands at the head of the list, but, besides its antifebrile properties (vaso-motor constriction) it also paralyzes the œmeboid activities of the white blood cells, all leucocytes, connective tissue corpuscles, the protoplasm of all muscle cells, etc., and in this way endangers the integrity of the circulation by weakening the heart's systole. Ergot has a powerful action as a vaso-motor stimulant, but it lacks the germ destroying powers that belongs to effective doses of quinine, which latter must be given in decided doses to produce specific depression of temperature, which no doubt it brings about in two ways; (*a*) by primarily stimulating the vaso-motors; (*b*) by paralyzing the oxidative activities of the protoplasm elements of the tissues; (*c*) by inhibiting the heat producing functions of the liver. Salicylic acid is a powerful stimulant of the vaso-motors, though this is denied by some writers; nevertheless

we often note the increased blood pressure, increased energy of the systolic contraction and louder first heart sound after a dose or two of this medicament; but like quinine, only to a greater degree, it seriously affects the heart muscle through its action on the activity of protoplasm, yet it is a most valuable remedy, and does have some very decided influence over the functions of the liver, besides being a decided antiseptic. Both these medicaments cause a diminution of bile acids being let loose in the blood to poison the tissues, which is one of the serious inconveniences in high and protracted heat diseases. There is a physiological feature in the action of these two medicaments; we refer to the dilitation of the cutaneous capillaries that appear under the influence of their action, for, even with this opened sluice-way, we find the blood pressure still elevated much more than it is under the action of other medicaments that simply dilate the cutaneous vessels without inducing a corresponding stimulation of the vaso-motors for other regions.

Antiparin is a decided poison to protoplasm, in virtue of which it arrests oxidation by stopping the interchange between the tissues and the O. of the blood. It also inhibits the vaso-motor centres, lowers blood pressure, diminishes the excretion of CO_2 and urea. Under its action, warm-blooded animals are turned into cold bloodcd ones, yet, strange to say, its action on the normal body is not at all striking save in negative results.

All things considered, we regard quinine and salicylic acid, the latter to be obtained from vegetable sources and not from the mineral, the best combatants of the ferbile state we have. It is well known to those who have used this form of salicylic acid dissolved in acetate of ammonia how much improved the vaso-motor tension becomes and how quickly congestions and weakened capillary circulation diminish and pass away.

The exhilireting and toning influence of coffee are due to the vaso-motor stimulating properties of caffeine, which, during the periods of depression in the course of acute heat diseases, is often refreshing and reviving to such patients. Many times have we seen the lethargic, stupid, half-dead patient revived by taking frequently small draughts of a mixture of infusion of good Java coffee with sweet cream, which acts as a stimulant and refreshing replenisher of the blood and energizes the circulation. We hold that caffeine is one of our best heart tonics and deserves a prominent place in our list of medicaments in the treatment of these typhoid forms of disease.

Ergot is a powerful controller of the vaso-motor centres; we note its remarkable action in pneumonia and the middle and later stages of continued fever in bringing about a decided increase of blood pressure and invigoration of the assimilating system. In all hemorrhages, especially of the passive kind, and fluxes, like dysentery, diarrhœa and polyuria, its action is positive; besides these it lowers high temperature, not only by acting on the vaso-motor centres, but also on the heat producing centre in nervous system.

It may be accepted that the weaker the vaso-motor system is made by the poisons that cause heat diseases, and the earlier this paresis manifests itself in the course of the attack, the more grave the symptoms will be that present. The rise of evening temperature is closely allied with the elements that contribute to collapse, and these are doubtless in turn related closely to vaso-motor depression. Another serious condition attending vaso-motor paresis is tissue asphyxiation, as the slow moving blood in the capillaries and the diminished supply of oxygen, tend to poison the nervous centres as well as the muscles, glands, etc. Slow asphyxia is not attended with heightened blood pressure as is acute asphyxia, but all the same it tends, in addition to the paralyzing action of the poison on the active anatomical elements of the organism, to kill the protoplasm and diminish the chances of life. We learn by clinical experience to value vaso-motor tension as a great aid in carrying grave cases through critical periods, and who, having made use of strychnine and belladonna to strengthen the tension of the vaso-motors and maintain them in a state of tone, or approaching it as near as may be, will fail to appreciate the soundness of our position. Great skill in practice is, not in having a large number of remedies at our fingers' ends and knowing but little of them, but rather in knowing everything about a few good ones, and acquiring tact in using them.

IODIDE OF POTASSIUM is a dangerous medicament in cases in which there is disease of the kidneys, especially when much albumen and casts are found in the urine. The danger lies in the fact that the iodide actually impairs the energy of the epithelium of the tubules to take the urea out of the urine and uremic collapse comes on.

PASTEUR has been made a legally qualified Doctor of Medicine—*Honories causa*—by the Paris Faculty of Medicine.

THE MAN WHO READS,

Other things being equal, will surely make the best physician. We note it every day. Surely it is as we say, that a mind brought in contact with great authors through their puhlished works imbibes the inspiration of the great thoughts that pour out of the writer's thought from or to his pages. We have ever found, in our intercourse with men, and especially with physicians, that those who are acquainted and conversant with the flow of current thought are freer from narrow prejudices, have broader views of the scientific side of medicine, and are more opulent in resources and successful in their application than are the men who read but little or not at all. We insist, that physicians must purchase some of the recent works put out by the trained intellects of the profession every year. A few dollars spent in this way, from year to year, will bring you in return hundreds of dollars in the increase of your success, in the enlargement and expansion of your thoughts, of your intellectual progressions and advancements, and—in money too. Read all sides, gather from every source the knowledge and truth afloat in the medical world. Do not be bigoted, and read only of your own side, for Truth and Science are the heritage of all great minds.

It is bigotry, intolerance, close communion, and trades-union notions and prejudices in medicine that we should shun. Eclecticism is surely above all these gross sins and vices, and on this account have we risen to the grand estate we now occupy in the world medical.

It is for the sake of our own liberality, our progress, our untiring and laborious efforts in the face of so much narrow bigotry, that we say to our Eclectic brethren that they shall be habitual readers, and be continued to be known among men as the most diligent and pains-taking and studious men in the medical profession.

We find a great deal of ignorance among the average of Allopaths; but few of them know more than they were taught at college, and, ever ignoring the rich fields of precious lore Eclectics have cultivated, persist in maintaining a wretched exclusiveness and thus perpetuate dangerous ignorance and foolish intolerance toward the liberal and progressive branches of the medical profession. Eclectics must know all sides, and study all systems, for various systems of medicine there are, though the Allopaths stupidly insist that they alone possess all that is worth know-

ing in medicine, and thus wall themselves in from all outside progress. No man, whose practice is worth mentioning, as far as resources and success are concerned, can fail to be anything short of Eclectic in principle and methods.

The Eclectic school is now recognized the length and breadth of the land for its progress, its successful doctors, its liberal principles. We must continue to be laborious students. Highly cultivated and accomplished men in our profession are always highly esteemed and recognized with profound respect, and accorded high merit by the intellectual masses who constitute the people of this progressive age and country.

A FORMULA

for the treatment of diphtheria, sore throat of scarlatina, in fact of any kind of sore throat, in nasal catarrh, when the patient is constantly annoyed by the formation of dry, green, brown or black scabs, or clinkers, which keep a constant hawking and scraping to remove them, the following will be found almost a specific. It is also a specific for nightly coughs, caused by tickling in the throat and from taking cold, is as follows: ℞. Biniodide of mercury; kali bichromium aa 40 grains; tinct. belladonna, 45 drops; sugar of milk, ʒ i (?); M.; triturate. In order to prepare this powder a little care is needed. Put the bichromate of potassa in a clean wedge-wood mortar, and pulverize it, then add the mercury and about two ounces of the sugar of milk, and triturate for a few minutes; then add about half the remainder of the sugar of milk and the belladonna, and triturate again for about fifteen minutes; then add the remainder of the sugar, and triturate thoroughly for three-quarters of an hour. Scrape the compound off from the sides of the mortar with a spatula from time to time. This powder alone will cure more diphtheria and more sore throats than all the other medicines in the materia medica. The dose for an adult is from five to seven grains dry, on the tongue, once in from three to eight hours.

The author of this formula captions the paper "Observations of a Medical Outlaw" (a re-vamped Allopath), in Eclectic Medical Journal. The quantity of sugar of milk noted in the formula is notably an error, more probably five to six ounces was intended; this we judge from the size of the dose designated.

SUCCESSFUL TREATMENT OF BRONCHOCELE by hypodermic in-

jections of ergotin is the subject of a paper in the Newburg Medical Monthly by Dr. C. J. Fox. Mrs. A——, aged forty-three; a large tumor, hard and unyielding, situated between the chin and clavicle, and very prominent; exopthalmia and dyspnœa and difficulty of swallowing were all well marked. The first enlargement of the gland was noticed about puberty. Exploration with the needle showed that the tumor was fibro-muscular in character. Commenced treatment by using ⅓ grain of ergotin in glycerin, gradually increased to 1 grain a day, and injected at blood heat; made in all some thirty injections, making three the first day and four the next two days, and then two at the interval of two days, then at longer intervals extending over a period of nine weeks. In about two weeks the result of treatment was apparent, to some extent, with diminution in the size of the tumor, and great relief from dyspnœa and dysphagia. The injections seemed to affect the nutrition of the entire body, for, during the nine weeks' treatment, she lost about seventeen pounds in weight, and at the end of the period of treatment the enlargement had all disappeared, and at last account she expressed herself as feeling entirely well. The menses, during the treatment were entirely absent, but since her cure have reappeared regularly, although in a much smaller flow than before.

THE FIGHT IN ALABAMA

waxes warm and glorious. How much like Belschazzar does the mud god of the State Board of Health feel—"turned out to grass."

The medical law of Alabama is a disgrace to any government, and more so to a free American State. If the Allopaths are unable to maintain their status without such laws to boost them, why then, the sooner they disband the better for the people at large. Nothing but the shoddy tribe need such laws to hold them up. The intention of the law was to kill off Eclectics and keep the field for Allopaths. It was used to these ends until recently. Nearly every Eclectic in the State had to join the Allopathic State Society to escape persecution. This is a fact shameful as it is.

The law was used by the Allopaths exactly in the same way and for the same purposes as the Established Church in England used the laws it obtained from Parliament to silence and root out dissenters and nonconformists. Who will say that the Allo-

paths of Alabama are not in the ring of a State Medical Church protected and nursed by the State!!!

In Spain, and other Catholic countries, the State Church objects to Protestant churches being granted any indulgence. So the law prevents Protestantism being preached in that country by placing all religious and ecclesiastic matters under the control and management of the clergy of the State Church. This is exactly what the law has done and is doing for the Allopaths of Alabama.

THE PARTISANS OF THE ILLINOIS STATE BOARD OF HEALTH,

like all men who have been clothed with irresponsible and arbitrary powers, are sorely afflicted because the high court of Chicago has reaffirmed its decision against the legality of the claim of the "Board," that it has the right to set in judgment, exercising authority and control over the graduates of medical colleges recognized by that Board, and practicing in the State.

It is not singular that men who have yielded such inordtnate authority without being responsible, should feel mortified when stripped of the power to continue in their tyrannical career. The powers exercised by that "Board" are nothing short of despotism, because the members are responsible to nobody but themselves. That Board itself is a court, a high court, possessed of more arbitrary and irresponsible powers than any other court of the land, because it makes its own laws, governs its acts by its prejudices and notions, and sits in judgment on the rights, and liberty and manhood, of a very large and respectable class of citizens of the State. That Board claims to be a law unto itself. What court in the land has power and prerogatives like unto that Illinois Board of Health?

Recently the "Board" issued an *edict* to the effect that colleges graduating more than forty-five per cent. of their matriculates each session will not be recognized by said "Board." Only imagine how this approaches Russian despotism. The powers exercised by this Board are equalled only by the sovereign of a despotic government like Russia!

THE COLLEGE.

At this writing, December 8, there are sixty-seven matriculates on the books. There are no loungers or indolent young men in the class. The course progresses steadily. There is

perfect harmony between the students and the faculty. Nearly all the first course students of last session are present, two absentees as far as are known, and they are prevented attending by causes they could not control. The class is good, viewed for all standpoints.

NOTICE.

The next meeting of the Tennessee Eclectic Medical Association will be held in Nashville, at the Commercial Hotel, on the 8th and 9th days of February, 1887. All Eclectics are urged to attend, as there will be business of importance.

W. H. HALBERT, Secretary.

LEBANON, Tenn.

FAIRCHILD BROS. & FOSTER are makers of as pure and active pepsin preparations as the science of chemistry and pharmacy can produce. There is no discount on this, and we suggest that you write this firm for a sample of their essence of pepsin, from which you will derive just such results as they claim for it when properly and scientifically used. See their advertisement in the Journal.

PEACOCK'S BROMIDES give excellent satisfaction when used in the proper cases. We suggest that you write to the manufacturers for specimens of their preparations. Fucus mariana has given undoubted good results when prescribed in chronic malarial diseases in which it is said by those who have used it extensively to be *the* remedy, and acts as well as an alterative as an antiperiodic. See their advertisement on the fourth page of cover.

TREATMENT OF ASPHYXIA OF NEW-BORN INFANTS.—The child lies on its back, head downwards, on the operator's forearm, held nearly perpendicular to the floor, and retained there by his fingers, which he hooks over its shoulders. In this position the child's arms fall downward to the side of its head, and their weight, aided by the thorax itself, at once draws the ribs into the position of complete expansion of the chest. If, now, the thorax be compressed against the forearm by the other hand and suddenly relaxed a most satisfactory respiration is the result. This method, combining, as it does, the advantages of an afflux of

blood to the brain, with a most efficient artificial respiration and an easy escape of fluids from the trachea, seems to me well worthy of a more extensive trial, especially as my experience with it, though not large, has been most satisfactory.—DR. E. REYNOLDS (Analectic).

Dr. Blesdale, as quoted in Analectic, says he has seen asphyxiated new-born infants "brought to" by being carried in the arms of a person while running up and down a flight of stairs three or four times.

NEPHRETIC COLIC.—In a recent case of nephretic colic the symptoms noted were: atrocious pain in the region of the kidney (left) running down the front of the abdomen, following the track of the spermatic cord, quite to the testicle, which latter was markedly retracted. The pain was paroxysmal and of the kind that seems to dampen the fires of life, and make living cruel. Gelsemium and lobelia seed, 1 to 4 of the tinctures, mixed, 30 drops every fifteen minutes during the height of the paroxysms. This soon relieved the pain, increased blood-pressure, and at the same time strengthened the heart systole, which was weak, and in a marked degree relaxed the system. After the severity of pain was mitigated, the intervals between doses were extended to thirty minutes, then to one hour. These large doses had no toxic effect, yet pain was relieved and the passage of the calculus facilitated. In three hours the stone made its way through to the bladder, and was finally discharged per urethra in thirty-six hours. Besides the tincture of gelsemium and lobelia, teas of infusion of hops and sage were given warm and liberally. The treatment is good and stands in marked contrast with that adopted by Allopaths generally, which is to inject morphia subcutaneously, and which is as irrational as to bleed a man to cure him of asphyxia.

CANE SUGAR IS NOT GOOD FOR DYSPEPTICS, lythemia, portal congestions, consumptives, diabetes, rheumatism, chronic gastric catarrh, chronic albuminuria, young babies under sixteen months of age, typhoid fever cases, and many other diseased states that may be mentioned. Though cane sugar does not ferment quite as readily as glucose, yet it is more easily converted into lactic and butyric acids. It taxes the energies of the economy to convert it into glucose or, more properly, maltose, into which it

must be transformed before it can be absorbed; hence it is more indigestible. It is, therefore, more likely to undergo fermentation in the alimentary canal. Bernard was of opinion that it may be absorbed from the stomach on account of its high diffusibility, in which case it reaches the liver in a state that puts an additional tax on that organ, and practically it acts as a poison on the hepatic cells. Many chronic invalids, as well as those suffering with acute disease, are often sadly damaged by the ingestion of cane sugar. Stick a pin here.

THE NORMAL MAN.—Huxley asserts (says the Medical Abstract) that the proper weight of man is 154 pounds, made up as follows: Muscles and their appurtenances, 68 pounds; skeleton, 24 pounds; skin, 10½ pounds; fat, 28 pounds; brain, 3 pounds; thoracic viscera, 3½ pounds; abdominal viscera, 11 pounds; blood which would drain from the body, 7 pounds. The heart of such a man should beat 75 times a minute, and he should breathe 15 times a minute. In twenty-four hours he should vitiate 1,750 cubic feet of pure air to the extent of 1 per cent. He would throw off by the skin 18 ounces of water, 300 grains of solid matter, and 400 grains of carbonic acid, every twenty-four hours; and his total loss during that period would be 6 pounds of water, and a little more than 2 pounds of other matter.

IODOFORM INUNCTIONS OF THE SCALP IN TUBERCULAR MENINGETIS has proven eminently curative in the hands of two Swedeish physicians—Dr. Emil Nilsson and Dr. Warfwinge. The method of treatment is to rub into the shaved scalp, twice a day, an ungent composed of iodoform 1 part and vaseline 5 parts—a lump equal to 5 grammes. The scalp is then covered with a waterproof cap and worn constantly during treatment.

In connection with the treatment of acute tubercular meningetis, we again call attention to the value of gelsemium and phytolacca, which have been so successful in the hands of Eclectics, while the bowels are kept slightly soluble with the tincture of podophyllum and iris versicolor, in small doses.

COW'S MILK, treated with hydrochloric acid and boiled, is said to be somewhat changed for the better by rendering the curd more soft, spongy and friable, which makes it more easily soluble in the gastric juice. The formula is: Cow's milk, 1 quart;

soft water, 1 pint; hydrochloric acid, ʒ ss; boil. Thus prepared, cow's milk is said to be more easily dissolved by the stomach-juices of infants. The milk, thus prepared, should be well beat with an egg-beater, and sweetened with milk-sugar. Fresh cream should be added to supply the needed fat.

BINOXIDE OF MANGANESE, when thoroughly triturated into an impalpable powder, has given excellent results in menstrual irregularities of the asthenic and atoxic type. The dose runs from 2 to 6 grains two or three times a day. Ringer cautioned against administering the manganese salts where there is acute congestion or high uterine reaction. The binoxide is certainly a more safe and less nauseous remedy than the permanganate of potassium. Better results will be obtained by using a triturate already prepared by reliable pharmacists.

BOOK NOTICES.

The Archives of Gynæcology, Obstetrics and Pædiatrics. We have received a note from the publishers of this excellent journal, stating that the success attending its publication is so gratifying, and the united voice of its numerous patrons being in favor of its being published monthly instead of bi-monthly, that in compliance with this pressing request the Archives of Gynæcology, Obstetrics and Pædiatrics will next year, commencing in January, be published every month. We take pleasure in recommending the Archives to our readers, and they will find it, as we have, a highly valuable and practical exposition of current thought and liberalism on these subjects. Drop a card to the publishers for a sample copy. Address, Leonard & Co., 141 Broadway, New York City.

The Library Magazine, published by John B. Alden, 339 Pearl street, New York. This is equal to any $5.00 magazine published in this country. In it you get the cream of the standard literary and classical articles published in all the standard current literature in European and American publications. We will send it for seventy-five cents a year. Write to Mr. Alden for a catalogue of his publications. You will be astonished at the low prices of his books, which embrace the best authors of all times. Be sure and send for a sample copy of the Library Magazine.

ATTENTION is called to DR. C. R. GILES' advertisement on page 15 (advertising department). Those looking to a change of location may find what they desire. So drop the Doctor a card.

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NEW FEATURES.—A glance at the above contents will show several new and practical features that have been suggested by our experience, or by those who have used the Visiting List for many years. These additions have been made, however, without increasing the size of the book and without altering its character or general arrangement.

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THE
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ORIGINAL COMMUNICATIONS.

SYMPATHETIC DISEASE.

CASE REPORTED IN ILLUSTRATION.

BY LEMON T. BEAM, M. D., JOHNSTOWN, PA.

The intimate sympathy which exists between the various parts and functions of the human organism is very often mentioned, but its practical importance is frequently overlooked or underestimated.

In any ordinary acute disease of the lungs, e. g. we find the skin, the liver, the kidneys, and other organs, to be affected in a very short time. If the lungs are impeded in their action they do not decarbonize the blood sufficiently, and hence it retains its noxious qualities, and, as it passes the round of the circulation, the kidneys have an extra labor to perform to take off their overcharge of morbid matter. The liver, also, may be overtaxed to throw it off; and the capillaries of the skin, too, may become obstructed by this accumulation. We can very plainly see that, if the primary seat of the disease were in either of these other organs mentioned they would *all* suffer. It is evident, also, that to remove a disease of the lungs we must recognize this mutual dependence; we must examine and treat as carefully these other organs that are more or less sympathetically affected.

Whenever the intestinal or urinary excretion is much diminished the febrile irritation of the system, it is well known, is invariably greater than usual, and, if this state of things be permitted to continue without relief, there is much risk of alarming cerebral symptoms quickly making their appearance. The practitioner will, therefore, do well to pay particular and uniform attention to the condition of the bowels and kidneys. Especially is this important in all the diseases of infancy and childhood; as,

for example, we need merely to note in passing, the frequent inactivity and, sometimes, the almost complete suspension of the functions of the bowels and kidneys, while the system of the child is suffering severely from dentition. As long as the kidneys act freely there is little or no risk in the symptoms of mere dentition, however severe and distressing these may be. The same remark is strictly applicable to the prognosis of most cerebral affections in children. When the renal secretion is scanty, the circulation seems to be both oppressed and excited, and the rapid, on some occasions almost instantaneous, mitigation of the alarming symptoms, after a copious discharge of urine, is well known to experienced practitioners.

But, aside from reflected or nervous influence, we believe there is a more direct sympathy existing between the various organs of the human machine. Let the cutaneous capillaries become obstructed, the perspiration checked, and we can readily perceive that the blood must become loaded with an excrementitious matter. The kidneys now attempt to throw this off; the liver also has an extra labor to perform; and, although these organs may have an increased action, yet they cannot entirely relieve the system from the superabundant accumulation of morbid matter with which it is loaded. Thus, obstruction is produced, and a derangement of the general system, as well as a weakness of those particular organs which were overtaxed.

It is necessary, always, for the physician to note carefully not alone defects in gastric and intestinal reduction of food, but also the perversions of absorption, assimilation, secretion and excretion, with the morbid nerve and blood states they create, and which are preeminently causes of functional disorders, as well as of secondary pathological changes in various parts of the body.

By far the more frequent and interesting—in fact, the most perplexing—cases engaging our attention, as medical men, are the purely sympathetic disturbances of digestive origin. This results by virtue of the office of the digestive apparatus, which is the *fons et origo* of nutrition and continued life, and of its extent of peripheral nerve distribution and ganglionic supply. In illustration, how frequent in town and city life, among active men of business, are cases like the following one from my Case Record:

CASE.

Hypochondria running into Acute Melancholia due to Sympathetic Disturbance of Brain—of Digestive Origin.—In August, 1879,

was consulted by Mr. S. P——, age forty-two; married; a merchant in good circumstances, with the habits of diet and life of his class. He had been employed in the vocation stated from early manhood, and never knew ill health until within the year of consulting me. Having, in addition to buying and selling mixed wares, assumed the extra duties of book-keeper and collector, he began to evidence loss of mental vigor—a want of power, fluency of expression and choice of terms to express his ideas in social and business circles—amounting by times to a momentary clouding of the intellect and suspension of memory. The frequent recurrence of these attacks created grave apprehensions, on the part of his wife and friends, of cerebral softening and possible imbecility, paralysis or insanity—a dread which steadily grew upon himself. He had found relief, at times as palliative, by making use of remedies furnished him by a number of physicians, in succession, and by taking a vacation now and then from the vocation he was pursuing.

I remember the case well. When he first applied to me his face bore a puzzled expression, and, after patiently hearing his statement and carefully considering the case, I feared he had exceeded "his limit of elasticity," and that he could never regain it. There were no positive indications of organic disease of the brain, as his pupils and retina were normal; he was free from pain in the head and spine; heart and lungs and kidneys normal; but he had a fickle appetite; slightly coated, irritable tongue, and slight constipation. He recalled, when questioned, that his attacks were preceded by gastric and, often, abdominal uneasiness, rarely slight colicy pain, and with their subsidence he had eructations of gas.

DIAGNOSIS.

Cerebral symptoms subjective, due to atonic dyspepsia. Being unable, as he thought, to change his vocation without suffering great pecuniary loss, he was led to forego the traverse and change in his habits of living and work, which I advised and which was chiefly indicated. Hence treatment failed to produce anything more than temporary relief from his almost constant state of mental gloom and bodily enfeeblement. His relapses into temporary fits of insanity became annoyingly frequent, at shorter intervals, and of prolonged duration, during one of which his friends were impelled to place him under restraint—which they did by having him quartered in an Insane Asylum in this

State (Pennsylvania). His friends (?) kept him there (at his own expense, however), for nearly five years. He claims, however, that the authorities of the institution detained him two years and a half longer than necessary, and that at least this length of time had elapsed since he was conscious of the dissipation of all his mental and digestive trouble, and of the heavy gloom which overcast his life. He declared to me, recently, that the only thing that hindered an earlier full return of physical elasticity and intellectual resiliency, and a youthful buoyancy of spirits, was the consciousness of an unnecessarily enforced absence from his family and business by the cupidity of his custodians. He now (nearly two years after his discharge by order of Court, on the report of a commission in lunacy), seems perfectly well and contented, and will, no doubt, continue so for a period commensurate with an observance of the laws of health and hygiene.

In conclusion, such cases, similating grave brain lesions, are induced by deficient innervation of the stomach, and the functional disorder reacts through the agency of the pneumogastric and creates directly the mental depression and distress. As well expressed long since by the celebrated Trousseau, "difficult digestion greatly interferes with intellectual work, impedes the expression of thought, and, when the difficulty is habitual, the disturbance of the gastric functions assumes the character of melancholy and hypochondria.

> "The spleen with sullen vapors clouds the brain,
> And binds the spirit in its heavy chain."

ELECTRICITY IN MEDICINE.

SIXTH PAPER.

BY GRIFFITH W. D. PATTERSON, PH. D., ATLANTA, GA.

The Galvanic Battery, as used in medicine, consists of, first, plates of two different kinds of metal, termed elements; second, the exciting fluid; third, the jar to contain the elements and fluid; fourth, the conductor—usually copper wire; and, fifth, the binding posts.

I shall describe, first, the single cell, and then a battery, understanding that a battery is a union of two or more cells.

It has been proven that all minerals are, by a law of polarity, peculiar to each individual mineral electro-positive and electro-negative to one another, in a greater or less degree as they are

more or less widely separated in the electro-chemical series of elements.

The most negative element is oxygen; therefore all the other elements are positive to it. Hydrogen, zinc, carbon, and copper are intermediate in the series, and are positive or negative in the electro-chemical series. This is the general rule, sometimes varied by the nature of the exciting fluid.

Zinc being used in all batteries as the generating plate, the strength or potential of the current generated depends on the activity of the exciting fluid, and the remaining or receiving element being near to or widely separated from this metal in the series. Just as three is more widely separated, in the numerical scale, from nine than from five, so is zinc more widely separated, in the electric scale, from carbon than from copper or from platinum; consequently the potential will be greater between zinc and either of the others named.

We start with a cell complete—a glass jar containing two unlike metals, partially immersed in an exciting fluid—the metals not being in contact, neither in nor out of the fluid. We will say one element is zinc, the other carbon; the exciting fluid for this is dilute sulphuric acid, with bichromate of potash in solution. As long as the metals are not united out of the fluid by direct contact nor by a connecting wire, no chemical action takes place, but the moment the elements are brought either into immediate contact or by a conductor, the acid attacks the zinc, chemical action takes place, electricity is generated and it passes through or across the fluid to the carbon or receiving plate, thence up this plate to any intervening conductor, thence through this conductor back to the zinc or generating plate—thus completing the circuit. We thus find that electricity is generated at the zinc plate; this is, therefore, the positive pole in the fluid. It passes across to the carbon, the receiving or negative plate in the fluid, up this plate, outside of the fluid, which now becomes positive as it leaves the fluid, passes along the conductor to the upper portion of the zinc plate, also out of the fluid, and termed now the negative plate. Bear in mind, the portion of the generating or zinc plate in the fluid is the positive end, the portion out of the fluid is the negative end; the portion of the carbon, or receiving plate in the fluid, is the negative end, the portion out of the fluid the positive end. Remembering this, there will be no difficulty to determine which is the positive or negative pole of the battery.

We call that pole attached to the receiving plate the positive pole, that attached to the generating pole the negative; and in batteries for medical use zinc is the element used for the generating plate, consequently the post or pole connected with the zinc plate is the negative—the one through which the current returns to the cell; the post attached to the carbon, or any metal that may be used in place of the carbon, is the positive, that through which the current comes from the cell. The receiving plate is not acted upon by the fluid, or very slightly.

A battery is formed by the union of two or more cells; this union is by the positive plate of one cell being connected with the negative of another outside the cell, thus: Suppose we have five cells, numbered respectively 1, 2, 3, 4, 5—the positive or receiving plate (usually carbon) of the first cell is connected with the negative or zinc plate of No. 2; the positive of No. 2 with the negative of No. 3, and so on up to No. 5; here the positive is connected by wire with the negative of No. 1—so completing the circuit. A battery so connected, the electricity generated on No. 1 passes across the fluid to the carbon plate, up this and across the connecting wire to the zinc plate of No. 2, down this to the fluid of No. 2, across this, up the carbon of No. 2, and across its connection to No. 3, and so continues to follow the connections through the five cells and back to the negative of No. 1. This is the electric path or circuit.

A battery thus arranged and connected is said to be connected for tension, positive and negative connection. It will here be asked, Does not each cell increase the quantity of electricity passing? The answer is, Very little, if any. Why? Because the resistance offered by the fluid and conductors of each added cell very nearly, if not quite, equals the quantity of electricity generated; so the potential or tension is increased with but slight addition to the quantity, or, more definitely, the electro-motor force is increased without an increase in quantity. This may seem strange, that added cells do not increase quantity, but the fact has been fully demonstrated by experiment. To get a greater quantity of electricity requires a different arrangement from the above, which will be fully explained.

One reason why zinc is used as the generating plate is, that the cost is very small, and it is easily decomposed, producing chemical action. Carbon is used as the receiving plate because of its cheapness and its durability, and because it is so much more neg-

ative to zinc that the initial potential in tension is so much greater than others in the list, because, as the more positive and negative two of the series may be, the greater the power to overcome the resistance offered by any intervening medium.

ACUTE HEAT DISEASES

Are noted for urea and other nitrogen waste debris being cast into the blood in copious quantity. Heat protracted is destructive in two ways on the organism; (*a*) exciting activity in the molecules of protoplasmic tissues; (*b*) in promoting chemical disintegration of the molecules. Proteids can be burnt, in a properly constructed furnace, down to urea in the presence of O. This is one of the results of life, but then in the normal state the process is under restraint and allowed to go on at a certain rate, just enough of energy being desired only to keep up the normal temperature on the one hand and to evolve work on the other. Heat disease converts the carbon moiety into fat just as in a furnace, for the urea sent out is also accompanied with CO_2 and H_2O, the products of combustion of fats. Nature goes along by steps and relays; she first converts the proteids of the tissues into some corbohydrate form as fat, burns it and liberates the nitrogen moiety as urea, etc. Hence in heat diseases, the restraining influences of the life of the organism being crippled in some way, the chemical disintegrating energies and other outputs of energy are all in the form of heat and its destructive effects. We have taught our class for years that proteid food is not the best form on which patients suffering protracted heat disease should be fed on liberally, simply because so far as the assimilating energies of the organism are concerned, the powers to appropriate food are in abeyance, so that the greater part of the food that enters the blood is only loosely held and hardly appropriated by the tissues, though it is no doubt circulating in the lymph spaces; but, then, subject it to extensive and violent chemical and molecular disintegration, and thus producing excess of heat and liberating energy through the very process of disruption, which in turn reacts on the stabile tissues and destroys them or helps to destroy them by the presence of nascent O thus liberated in their immediate presence.

Let it be known that proteids are powerful stimuli to destructive metamorphosis, and when a proteid equilibrium cannot be

established, the tissues are sure to be melted down to compensate the activities of the chemical and molecular disruptions in the organism provoked by them.

Many men decry beef tea, and charge that it contains nothing that is worth contending for. This is a grave mistake. It is true the extractions and salts it contains are not proteids *per se*, but we contend the juice is capable of maintaining energy, and the disruptions of the molecules of proteic things it contains, within the organism, will not give place to such violent destructive activities in the tissues as pure proteids will. A good form of beef tea is made doubly valuable by adding some amyloid stuff to it, properly cooked so as to gelatinize it, and some glycerine or cream can be added to supply fat. This compound supplies a large quantity of hydrocarbon combination to serve for combustion in the tissues, and thus save the staple proteid or histological elements of the organism.

Water is imperatively required during the continuance of heat disease, yet, strange to say, such patients seldom call for water. It was a favorite notion with pathologists to say that water was retained in the system and not thrown out during heat disease. This, in our opinion, is an error. The wet state of the tissues after death observed, is owing to disintegration. Now we say all the functions and senses are blunted during heat disease, hence these patients do not call for food or drink. At no time during the life of a person is water so much required to wash out the histological elements and the lymph paths, to clean out debris and effete stuff, as during protracted heat disease. Give such patients plenty of water, and often you may add more chloride of sodium to it or to the food, liberally, because this salt has the valuable physiological property of stimulating the activity of the protoplasmic elements of the convoluted tubules, and thus pick out urea and other nitrogen crystaloids from the blood and cast them out in the urine.

A good form of amyloidal food is obtained from boiling a bundle of wheat flour (about a teacupful tied up in a cloth) in soft water for three or four hours. This serves to convert much of the starch, etc., into glucose, dextrin, maltose, etc., and the proteids are somehow loosened in their molecular bonds so as to be more digestible. Grate a tablespoonful of this lump into a fluid of one part water, two parts milk, and boil gently for thirty minutes into a smooth pap, free from lumps.

We must again call your attention to the food value of yolk of egg two parts, glycerine one part; mix well. This is proteid and hydrocarbon mixed with fat and all of easy assimilation, fed raw or mixed with some milk. Spare the metabolic energies as much as possible. A little infusion of good browned coffee with milk helps to slow the destructive processes; at the same time the coffee is a vaso-motor stimulant.

During the after part of the day and the night hours all protracted heat diseases (the patients) need great care in close watching, so as to prevent and forestall collapse, for by careful watching a very large per cent. of the otherwise fatal cases may be prevented, as you know a stitch in time saves nine, and, better yet, an ounce of prevention is worth more than a ton of cure under these conditions.

MY POCKET CASE — CONTINUED.

BY I. J. M. GOSS, MARIETTA, GA.

Datura Stramonium and Datura Fatula.— These plants contain an alkaloid, which usually is impure, and consists of atropine and hyoscyamine, and has about the physiological action of atropin, but not so powerful. Uses.— The chief uses are as an anti-spasmodic in asthma, and as a remedy in hallucination and wild delirium. I use a tincture of the leaves and seeds in epilepsy, in doses of 10 to 15 gtts., three times a day, with the bromides.

Delphinium Staphisagria.— The seeds of this plant contain several alkaloids, but the most important ones are delphinim and staphisagrine. I use a tincture of the seeds, in doses 1 to 5 gtts., ter die. It is indicated in spermatorrhœa, especially where the prostatic portion of the mucous membrane of the urethra is the seat of chronic inflammation. Also where such inflammation extends into the seminal ducts and ejaculatory canals. It is also a valuable remedy for odontalgia where the teeth are decaying. It has proven a good remedy in sea-sickness, in doses of 3 to 5 gtts.

Ergot.— Ergot is used for two purposes: (1) to cause contraction of the uterus in labor; (2) to check hemorrhage. It is indicated in cases of labor where the contractions of the uterus are feeble. It produces tonic contraction of the uterus, hence it should never be given where there are mechanical obstruction

to delivery, as it might produce rupture of the walls of the uterus. It is used to prevent post partum hemorrhage. It is also used in chronic metritis, in subinvolution of the uterus and to promote the expulsion of the retained placenta or membranes. It is used in atony of the bladder and in enlarged prostate gland. It has been recommended in fibroid tumors of the uterus, in doses of ʒ ½, every two or three hours. It is used for hemorrhoids by the hypodermic injections of equal parts of ergot (fluid extract) and carbolic acid. It is recommended in hemorrhage of the lungs and bowels, but is inferior to lycopus systemically used, and the per-sulphate of iron — monsels salt. In spinal meningitis it is inferior to belladonna and the bromides.

Erythroxylon Coca.— Cocaine is now much used as a local anæsthetic. When a strong solution is applied, it stimulates the peripheral ends of the sympathetic nerves. When injected subcutaneously, it produces local anæsthesia of the part to which it is thus applied. Internally taken, in small doses, it has a stimulating effect, and in large doses it has a paralyzing effect upon the nerve centers, somewhat like caffeine. A 4 per cent. solution dropped into the eye produces local anæsthesia, so that operations for cataract, or squint, can be performed under its influence.

Equisetum Hyemale (scouring rush).— Although this plant has never attracted much attention from regular physicians, it has long been used by the people, and to a considerable extent by scientific American physicians, and my experience with it satisfies my mind that it is a very positive remedy for irritable bladder, calculus irritation, dysuria with pain after urinating. It has proven also very positive in suppression of the urine, gonorrhœa and gleet. The dose 1 to 2 ʒ of the infusion or 10 to 30 gtts. of the tincture.

Erigeron Canadense (Canada fleabane).— The oil of erigeron is a most positive remedy in hemorrhage of the uterus, and a valuable remedy in passive hemorrhage of any part. I use the tincture of the oil, 1st dec. dilution in alcohol, dose 5 to 10 gtts., every fifteen or twenty minutes until the hemorrhage is arrested.

Eucalyptus Globulus (Eucalyptus leaves).— The oil, like other terpenes, possesses the power to convert water, in the air and sunlight, into hydrogen peroxide, or to convert oxygen into ozone. The oil or the tincture may be used locally as a lotion, or by inhalation or gargle, to remove fetor and to destroy the

lower organisms producing disease, or those that accompany disease. The tincture, saturated, may be given in doses of 5 to 15 gtts.; the oil, in doses of 1 to 5 gtts. The oil, with the tincture of calendula, forms a good antiseptic dressing for cuts, etc.

Euonymus Atropurpureus (Wahoo, so called).—The fluid ext. of the bark of the root, or the saturated tincture, or the euonymin may be used for torpid liver and in gastric debility. In large doses, any of the above preparations act as cathartics. It is believed to act on the spleen, and to reduce it when enlarged from malaria.

AMBROSIA TRIFIDA.

BY J W. PRUITT, RUSSELLVILLE, ARK.

This plant is fully described in King's Dispensatory, page 92, eleventh revised edition. Its properties are given as slightly stimulant, astringent, and antiseptic; but it has a far more important and valuable property than any of these. I refer to its anodyne or hypnotic effects.

My attention was first called to it by a very intelligent Baptist minister, whose wife was one of those nervous, fidgety little women who are never still, only when asleep. Her great enemies were headache and insomnia. The husband informed me it was the only thing that would calm his wife's nerves and procure the needed rest when she "got into one of her nervous, sleepless spells at night." I asked him how he used it; he recommended a strong decoction, made of leaves and stalk, in doses of a tablespoonful every hour until the desired effect was produced. Having on hand a fresh supply of the decoction, he brought me about half a pint. To this I added glycerine enough to preserve it. *My* wife sometimes has also "sleepless spells;" recommended her to try Brother Weaver's ragweed tea. She did so, and was perfectly delighted with the result; saying "It just calms you, and you go right off to sleep, just like a baby, without knowing it." I prepared a tincture with dilute alcohol, which Mrs. P. tried, but said "it did not act like the tea."

This short article is written to stimulate investigation; and if future researches should confirm the above, another valuable agent will be added to our list of anodynes.

A gentleman, with whom I was once in conversation on the subject, informed me that he had known it to be used with good effect in the Summer diarrhœa of children. This would be a good direction in which to experiment.

ABSTRACTS.

ON THE MEDICATION OF NERVES — A NEW METHOD.—Dr. J. Leonard Corning, of New York, consultant in nervous diseases to St. Francis Hospital, Jersey City, more than a year ago brought to the notice of the profession (*N. Y. Medical Journal*, Sept. 19, 1885) certain experiments, through the instrumentality of which he was fortunate enough to ascertain certain facts of practical value to his colleagues engaged in the practice of surgery. In the first place, he conclusively demonstrated that the suspension of the circulation in a part into which cocaine has been injected was sufficient of itself to prolong anæsthesia for any length of time. Secondly, he showed that when the precaution of suspending the circulation has been observed, it is no longer necessary to employ strong solutions of the anæsthetic but, on the contrary, the strength of the latter might be reduced to an incredible extent, and yet anæsthesia of the part be induced and indefinitely protracted. The significance of these facts was at once appreciated by a large number of surgeons, and soon medical literature in both this country and Europe began to teem with the accounts of numerous operations, more or less extensive, in which my method of inducing local anæsthesia had been resorted to with the most flattering results. After these reports of successful operations had continued to appear for several months, exciting continuous comments both in this country and Europe, he decided to select some of the more noteworthy of these cases, and to embody the same in book form. At the same time he availed himself of the opportunity afforded by this publication to elaborate the technique of his method, so as to make it almost universally available ("Local Anæsthesia," by J. Leonard Corning, M. D. New York: D. Appleton & Co. 1886). The reception by the medical press and the subsequent large sale of this book have convinced us that his endeavors in the cause of scientific medicine have been amply appreciated by his colleagues in the profession. All this is, of course, gratifying. Still, while he was glad to have rendered service to such of his colleagues as are engaged in the practice of surgery, it was but natural that the desire should have been rife, in one interested in neurological medicine, to make the method of some use in that branch of practice. Indeed, at the very beginning of his

scientific labors, he saw certain possibilities in this direction, particularly in the treatment of derangements of the peripheral nerves. Thus, in his original paper (*N. Y. Medical Journal*, Sept. 19, 1885), he said: "In the treatment of neuralgias, and other disorders of the peripheral nervous system, it (my method) is, I believe, destined to render good service." For some time these scientific anticipations remained without fruit of a practical nature; for, indeed, his professional engagements had been such that he was unable to follow them to a practical sequence. Some time since, however, he was able to put his theories to a practical clinical test, and it is with a view to reporting the same that we publish this paper:

The first case in which I put my method to a test was one of sciatica of long standing. The history of the case, and its treatment by me, is briefly as follows:

B. F., woman of forty-five years, single, of feeble neurotic temperament, came under my care some time since. On making a careful examination, I found the following condition of things: She had long suffered from uterine displacement, caused, as I was informed, by an attempt to lift the end of an upright piano. From this time forth her health had gradually failed; she had lost flesh, her appetite had become poor, her sleep, which was never of the best, had deteriorated to such a degree that, as she expressed it, she was "never wholly unconscious," her menstruation was painful and irregular, and she suffered from a morbid apprehensiveness, exhibiting itself in a dread of all society and in an inability to sleep without a light in her bedroom. The chief cause of her distress was, however, a violent neuralgia of the right sciatic nerve, which was not benefitted by any of the various forms of uterine support. From this she had suffered, at intervals, for the past fifteen months. On examination, many painful points were found along the course of the nerve; the limb was maintained in a partially flexed condition most of the time; there was considerable cutaneous hyperæsthesia, but no anæsthesia; the pain, which was intense during the day, was greatly aggravated at night, and the mere touch of the bed clothes was often sufficient to cause an intense paroxysm; the affected limb was pale and cold to the touch, the relative difference between the healthy and affected side being great.

The physician under whose care she had been previous to consulting me, had, very justly, as it then seemed to me, attrib-

uted the sciatica to the uterine displacement, and had accordingly applied a pessary. This treatment had, however, afforded her absolutely no relief. Subsequently galvanism, the actual cautery, blisters, hot and cold fomentations, the Turkish and Russian baths were all essayed, but without any considerable benefit.

When I first saw her she was suffering from a paroxysm of unusual severity, so that short periods of sleep were only obtainable by the use of copious morphine injections. The latter were made over the painful points along the course of the nerve; but what little relief the patient thus obtained was but temporary. All usual measures having failed, I finally had recourse to the following procedure:

I injected one hundred minims of a ½ per cent. solution of cocaine at two of the more painful points along the course of the nerve, and immediately thereafter applied a tourniquet in such wise as to interrupt the circulation in the crural artery, above the point of injection. As a rule, I believe, the tourniquet should be placed as high up as possible. In this case it was located as near Poupart's ligament as was consistent with the retention in place of the instrument

During the first five or ten minutes little relief was experienced, but after the lapse of twenty minutes the pain had sensibly diminished, and in half an hour it had entirely disappeared. The patient complained somewhat of the pressure of the bandage, but this was relieved by placing a small roll of cotton under the tourniquet, where the latter passed over the nerve-stem. The tourniquet being removed, she declared that she felt no pain, even after the lapse of eight or nine hours. On the morning following the treatment there was, however, a return of pain. I immediately made the injections and applied the bandage as before. This time, after the removal of the tourniquet, there was no return of pain for four days. Without entering further into details, I may state that for three weeks this mode of treatment was persisted in, the incarcerated injections being resorted to whenever there was a recurrence of pain. The periods of exemption became longer and longer, until the pain finally left her, apparently for good. It is now four months since the last injection, and there has been no return of pain.

The second case in which I resorted to this method of prolonged medication was that of a lady of sixty-five, who was like-

wise a sufferer from sciatica of many years standing. In her case the usual expedients had been resorted to, but with little or no avail.

As in the previous case, I made copious and deep injections of solutions of the hydrochlorate of cocaine, incarcerating the medicament by the application of the tourniquet above the point of injection. This prolonged contact of the medicament with the nerve-stem proved almost as salutary as in the previous case, but, owing to the long continuance of the painful affection, treatment was more prolonged. Finally the tendency to a recurrence of the painful paroxysm was overcome. Three months have now elapsed since the last medication of the nerve, and there has been no return of the pain.

A third case of sciatica in a man of fifty, who has been under my care for the past two months, and who has been treated in exactly the same manner as the two previous cases, exhibits every indication of eventual complete recovery.

These cases have aroused in my mind an interesting train of reflection, and I will take the liberty of stating briefly some of the conclusions to which I have been unavoidably conducted:

1. That this method of subjecting the nerve to the prolonged chemical action of an adjacent medicament possesses advantages of a theoretical and practical nature which are not easily overestimated.

2. That this prolonged medication of the nerve, by incarceration of the medicament, is incomparably more advantageous than the ancient expedient of simple injection, without incarceration by suspension of the circulation. In the former case the medicament is held in contact with the nerve for a period of time, which may be prolonged at the discretion of the physician. In the latter case it is a matter of extreme doubt whether the nerve is influenced to any appreciable extent, since the medicinal solution is at once removed by the general circulation, and has, therefore, no time to induce the requisite chemical changes in the nerve filaments.

3. Solutions of low percentage (½ per cent. or ¼ per cent.) should be employed for prolonged medication of nerves, as it is thus possible to inject large quantities of the medicament without danger of constitutional symptoms. It is, moreover, clear that the prolonged presence of this large amount of fluid in the neighborhood of the nerve-stem must inevitably, through the

operation of imbibition, profoundly affect the nervous filaments.

4. The medicated fluid should be injected as near the affected nerve as possible, but care should be exercised not to wound the latter. These profound injections may be accomplished without pain by injecting a small quantity of the anæsthetic before the point of the needle, as the latter is propelled into the tissues.

5. The treatment by prolonged medication is without danger, and therefore superior to nerve stretching by the surgical method, which in point of reliability leaves much to be desired.

6. Cocaine is only one of many fluids which may prove useful when applied according to this method.

These, then, are some of the conclusions which have forced themselves upon me, and I confidently trust that the method of treatment above detailed may continue to yield rich results in the hands of my colleagues in the profession.— *N. Y. Medical Journal.*

PASTEUR ON HYDROPHOBIA.— At a recent meeting of the Paris Academy of Sciences, M. Pasteur read a second note on his treatment for hydrophobia. He said he was excessively surprised to find the number of people bitten by mad dogs to be so great. On February 28, with the aid of Dr. Grancher, he inoculated the 350th patient; of these, one is dead, Louise Pelletier, aged ten. When she was brought to M. Pasteur's laboratory he had little hope of saving her life, and stated, in his note to the Academy of Sciences, that, in the interest of science, he ought to have refused treating her, but preferred to gratify the natural desire of her relations. She was placed under M. Pasteur's care six days after the bite had been inflicted. There was an extensive purulent sore on her head, which had not been modified by medical treatment. On November 27, eleven days after the treatment was applied, symptoms of hydrophobia manifested themselves, and the child died on December 3. A serious question had to be decided, whether she died from the treatment or from the bite. Twenty-four hours after death the cranium was trephined in the region of the wound, and a small quantity of cerebral substance was removed. Two rabbits were inoculated with it, and died simultaneously of hydrophobia eighteen days subsequently. After the death of these rabbits, others were inoculated from their spinal cords, and died fifteen days later. These series of inoculations show that Louise Pelletier died from

the bite and not from the inoculations, otherwise the second series of rabbits would have died after seven day's incubation instead of fifteen. The rest of the patients are in a satisfactory condition, and the inoculations have never produced any serious local disturbance, neither phlegmonous swellings nor abscesses. After the last inoculations, there is sometimes a little redness and œdema. M. Pasteur states that statistics show that it is generally during the first two months after the bite has been inflicted, that hydrophobia declares itself. The patients under treatment are classified as follows: One hundred were bitten before December 15, now ten weeks ago; one hundred vary from six weeks to ten; one hundred and fifty are under treatment, and are in excellent health. M. Pasteur urges that an inoculation establishment for hydrophobia should be organized.

M. Vulpian commented on the necessity of relieving M. Pasteur from the care of finding shelter for his patients; he also considered it to be of the highest importance that the treatment for hydrophobia should be for some further time applied at Paris under the superintendence of M. Pasteur. M. Pasteur estimated that the expenses of an inoculation establishment would be 50,000 francs (£12,000). Patients arrive from all parts of the world. Four Americans who have been treated, and apparently cured, reached M. Pasteur's laboratory twenty-one days after the bite had been inflicted; nevertheless, it is an error to suppose that prolonged delay is not dangerous. The process of incubation goes on from forty to sixty days. Treatment at that period would coincide with the outset of the symptoms. M. Pasteur does not consider that the French government ought to be asked to subsidize the establishment, but that it should be supported by public and international donations.

M. Freycinet said he believed that he might promise the support of the government. The government authorities would consider it a privilege to be associated with M. Pasteur in his enterprise.

M. Leblanc, member of the Academy of Medicine and Sanitary Directors of the Prefecture de Police, has furnished M. Pasteur with the following statistics: In 1878, out of 163 persons bitten there were 24 deaths from hydrophobia; in 1879, 76 were bitten, 12 died; in 1880, 68 were bitten, 5 died; in 1881, 156 were bitten, 23 died; in 1882, 67 were bitten, 11 died; in 1883, 45 were bitten, 6 died. According to these statistics, the average mortality was one death in every six cases.

M. Pasteur desires that the inoculation establishment for hydrophobia should be a centre for studying virulent and contagious diseases; what he has discovered in relation to hydrophobia must also have a bearing on other diseases. It is now a question whether diptheria may not be successfully treated on principles based on these already formulated.—*The London Medical Record.*

A STUDY OF SOME NEW PURGATIVES.—Dr. Desnos has been making a study of the physiological effects of the following four new purgatives: baptisine, sanguinarine, juglandine and phytolaccine. He has given these purgatives to forty-eight different individuals in the following proportions: Baptisine to fourteen, sanguinarine to four, juglandine to thirteen, and phytolaccine to seventeen. They were given in pill form in doses of 10, 20 and 30 centigr. (1½, 3 and 4½ grs.). The first dose was administered at 10 a. m. and the second dose at 10 p. m. The four drugs had the common property of causing no disturbance whatever in the stomach. In some of the cases purgation occurred after the first dose, in the majority of cases not until some hours after the second dose, and in a few cases of obstinate constipation no effect followed until an enema had been given. Baptisine proved to be an efficient cholagogue, and excepting a few failures in patients who were in bed, it showed itself a faithful purgative. The dose employed ranged from 10 to 30 centigr. (gr. 1½–4½). Sanguinarine did not fulfill the expectations derived from experiment with that drug. The author has given it in as large a dose as 60 centigr. (gr. 9) with negative results only. Juglandine exhibited marked cholagoguic properties in doses of 10 to 20 centigr. (gr. 1½–3). Phytolaccine is also an efficient cholagogue in the same doses as the preceding, The author prefers it to all the others. It produced easy and copious stools containing considerable bile. In large doses it provoked vomiting, followed by depression, and in a few cases even by convulsions. In conclusion, the author states that baptisine and juglandine are designed to render incontestable service as laxatives in spite of some inconveniences, and that phytolaccine, being most certain and attended with fewer inconveniences, will form a valuable acquisition to the therapeutics of constipation. Sanguinarine, on the other hand, does not deserve to come into favor.—*N. Y. Med. Journal.*

NAPHTHOL.—An ointment containing 25 grains of naphthol

and 6 drachms of vaseline is considered a good application in eczema, tetter, psoriases, etc.

HOW TO PREVENT DIPTHERIA.—The first and most essential agents for preventing contagion are cleanliness, pure air and sunlight. The first means to be thought of is *isolation*. The patient ought, if possible, to be placed in an upper front room that is light and airy, and all but adult members of the family excluded. No children should be permitted to be exposed to the contagion. All unnecessary furniture should be removed, and, as far as possible, proper germicides should be freely used.

Disinfection—For air of sick room: ℞. Potassium permanganate, 1 drachm; oxalic acid, 1 drachm; mix and moisten with twice the quantity (by bulk) of water; in two hours add a small quantity more of water. It will emit ozone freely enough for a large room, and it is an active disinfectant.

For water-closets, drains and water-pipes: Hot water, 2½ gallons; copperas, 4 pounds; carbolic acid, 4 pounds: especially useful in typhoid fever, dysentery, etc., as well.

For drains, ditches and sewers, disinfect with chloride of lime. One pound is sufficient for one thousand gallons of running sewerage.

For washing clothing: Sulphate of zinc, 2½ ounces; carbolic acid, 1 ounce; hot water, 1 gallon. Soak the clothes twelve hours, then wash.

Fumigation after Contagious Diseases.—With sulphur. Only practical method. Heavy clothing, blankets, etc., to be disinfected, should be opened and exposed. Close the room as tightly as possible; stuff all cracks and paste paper over key-holes. Put the sulphur in iron pans; set on bricks in wash-tubs containing a little water; ignite the sulphur by aid of hot coals or a spoonful of alcohol poured over it and ignited with a match. Hasten from the room, and keep it closed for twenty-four hours; then open the windows wide and air it thoroughly. For a room ten feet square, use 2 pounds of sulphur, and for larger ones a proportionate quantity.—*Health Record.*

CHEESE SOUP.—Take an ounce of soft, fat cheese; work it through a wire sieve of medium mesh into a basin; work it into a little skim milk, with a spoon, till it forms a perfect emulsion and all the lumps have disappeared. This will be facilitated by

placing the basin in warm (not hot) water. Take half the milk required for the quantity of soup wanted, and mix it well with three dessertspoonfuls of corn flour. Boil the rest of the milk; add two or three finely chopped onions when it boils; simmer till they are soft; strain through a sieve and warm again, gradually stirring in the flour and milk. When it forms a thick paste take it off the fire, and add it by degrees (with a spoon or cup) to the cheese emulsion, stirring this well while doing so. When enough of the soup has been added to the cheese mixture to make it quite warm, stir it into the rest of the soup in the pan. Boil up, season to taste; add milk if it is too thick. Potatoes or tapioca may be used instead of corn flour. The essential points are to get these mixtures thoroughly dissolved, and to add the warm soup gradually and stir it well, otherwise the cheese solidifies in a mass. By treatment in this way, cheese becomes converted to one of the most digestible of food substances, and indefinite scope is given for its use in cooking in the form of soups, sauces, etc.—*Herald of Health.*

TREATMENT FOR HYSTERO-MANIA.— Dr. A. L. Hodgdon, of Farmwell, Va., says: The following formula I have found useful as a calmative in hystero-mania (hysterical insanity): R. Extr. cimicifug. fluid, ℥ jss; extr. vibur. prunifol. fluid, ℥ j; extr. conni fluid, ʒ j; tinct. cannab. indic., ʒ jss; syrup, ʒ x. M. Sig.— Two teaspoonfuls three times a day, and see that its components are thoroughly mixed before exhibiting. Two of the ingredients of the formula before mentioned—the hemp and the hemlock — are of notoriously uncertain strength. Hence the proportion of each of these drugs to the rest of the prescription must always be governed by their respective strengths, and the mixture should never be administered excepting with extreme caution, carefully watching its effects.—*Maryland Med. Journal.*

HOLMES ON MEN.— Dr. Holmes says that men remind him of pears in their way of coming to maturity. Some are ripe at twenty, like human Jargonelles, and must be made the most of, for their day is soon over. Some come into their perfect condition late, like the autumn kinds, and they last better than the summer fruit. And some that, like Winter Nelis, have been hard and uninviting until all the rest have had their season, get their glow and perfume long after the frost and snow have done their

work with the orchards. Beware of rash criticisms; the rough and astringent fruit you condemn may be an autumn or a winter pear, and that which you picked up beneath the same bough in August may have been only its worm-eaten windfall.— *Ex.*

REMEDY FOR CHORDEE.— Dr. C. L. Kitchen, of E. Saginaw, Mich., in the Medical Age, says that for two years he has been using chloral hydrate gr. x. potas. bromide gr. v-x to aq. dest ʒ j as an injection for chordee, and has never known it to fail of affording perfect relief. He usually adds morph. sulph. gr. ij to the ʒ j. He does not think that chloral hydrate, or this mixture is indicated in all stages of the disease, but when chordee comes on, can confidently recommend the use of it, and usually no other injection is needed afterward.—*Epitome.*

A JUST DECISION.— The Medical Press relates the decision of a judge who sentenced a man to five years' penal servitude for knowingly infecting a woman with syphilis. Thus a man who, suffering from gonorrhœa or syphilis, has immoral sexual intercourse with a woman is liable to penal prosecution and penal servitude. It would seem as if this were a just decision. The practical application of this doctrine would act as a powerful stimulant to virtue. Convictions, however, would be difficult to obtain.—*Indiana Eclectic Med. Journal.*

PRICKLY HEAT.— I have tried everything that a fat man suffering the tortures of sheol could think of, and got no relief until I used a two per cent. aqueous solution of sulphate of copper, applied with a bit of soft sponge and allowed to dry on the skin. It drys up the eruption in from one to three days. The wash should be applied morning and night.—*St. Louis Med. and Surg. Journal.*

NOURISHING SOUP.—Stew two ounces of washed pearl sago in a pint of water until it is tender and thick, then mix it with half a pint of good boiling cream and the yolk of two eggs. Mix with it carefully one quart of the essence of beef, which must be heated separately, and the two put together while hot. A little of this may be heated at a time, as wanted.

RHUS AROMATICA is said to be a valuable remedy in incontinence of urine, and is now being used frequently in that complaint. Try it.—*Med. Call.*

A COUNTER-IRRITANT.—As Eclectics we don't believe in active and persistent counter-irritation. But there is often a demand for an irritating plaster, and what kind to use is often the question. There are often violent objections raised to canthari des, croton oil is not always advisable, and various others are undesirable.

The writer, within the past twelve years, has had an experience with the use of the "Emplastrum Au. Thapsia," an irritating plaster of French origin manufactured from the Thapsia Garganica, an herb indigenous to Northern Africa. There is a Thapsia plaster manufactured in the United States, but it is in every way inferior to the imported article and will not produce satisfactory results.

There are but few cases in which a counter-irritant is needed where this plaster is not superior to any other, provided, however, its action be understood and the proper precautions be used. In from three to eight hours—differing thus widely in different patients, as there is a difference in the susceptibility of the skin to irritants—the surface under the plaster assumes a thickened and roughened appearance. The roughness rapidly assumes the appearance of minute pustules crowded into the very closest possible space, the base being in immediate apposition.

These pustules rapidly fill, and, if scratched or irritated, will discharge a thin serum. Immediately the pustules begin to form it is best for ordinary purposes to remove the plaster, as they will fill almost as rapidly if it is removed as they will if it remains. After thirty-six or forty-eight hours, if the pustules are not broken, they will gradually dry up and the skin assume a normal appearance.

In some cases the irritation is very rapid. The pustules form rapidly; there is intense and unendurable itching; the skin becomes tumefied, swollen, and an actual local inflammation is produced, accompanied by the usual constitutional symptoms. These results, however, will not occur if the proper precautions be observed.

There are but few cases in which there is not, almost from its first application, an intense itching with an almost irristible desire to "scratch." This, however, must be resisted. If the pustules are broken and the serum brought in contact with the healthy skin the same pustulation occurs there as that originally produced, and the irritation can thus be carried over a large surface.

There is a great tendency for the irritation to spread naturally, and, for that reason, a smaller plaster must be applied than that usually indicated, and the formation of the minute pustules closely watched. Starch is an immediate antidote for the itching. The glycerole of starch is an elegant application, but not quite as efficacious as a simple starch paste, or starch water.

The nicest dressing is a mixture of starch and warm water, spread rapidly over the surface, and this immediately covered with a layer of cotton, retained by some simple bandage. This scarcely ever fails, and prevents the clothes from coming in contact with the irritated surface, to increase and spread the irritation. The patient must be cautioned against scratching or rubbing the surface at all, not even through the dressing.

This plaster is indicated when there is active local inflammation. The writer has used it in pleurisy with effusion, with the most admirable results. It rapidly causes absorption of the effusion, and restores the normal funciional condition of the parts. In inflammation of the kidneys it works well. It has been used all over the chest in acute bronchitis, and also in incipient phthisis, with satisfactory results. In a case of acute conjunctivitis, very severe and protracted, the inflammation was controlled within forty-eight hours by the application of a small square (one inch) to each temple. It produced violent irritation of the skin, extreme swelling and distortion of the features, but was gone within two hours after a slippery elm poultice was applied to the irritated surfaces. This poultice will stop the action of the plaster immediately, if such a result is at any time desired, and seems to actually increase the effects of the plaster.

The best e..ects have been obtained from the use of this plaster in neuralgia and rheumatism. Several severe and intractable cases of sciatica have yielded with magical promptness to its healing powers, and the cure was permanent. We can advise its use conscientiously, but would always advise the patient as to its active character and caution against increasing the irritation by scratching.

A friend, not a patient of the writer, prescribed it for her own use without advice, and not being cautioned against the scratching, spread the effects uniformly over the upper part of the body, neck, face, and head.—*Chicago Med. Times.*

TRANSMISSION OF SYMPTOMS OF HYSTERIA UNDER THE INFLUENCE OF A MAGNET.— M. Babinsky, in a paper read at the

Paris Biological Society, stated that, under the influence of a magnet, certain hysterical symptoms may be transferred from one person to another, even should these persons be placed at some distance from each other. In a first series of experiments, practiced upon two hystero-epileptic patients capable of being hypnotized, the hemianæsthesia from which they suffered was transmitted from one to the other, as well as other symptoms produced in one of the patients by suggestion; different forms of paralysis, brachial or crural monoplegia, hemiplegia, paraplegia, coxalgia, dumbness, etc. In a second series of experiments, one of the above mentioned patients was placed in communication with patients suffering from different forms of hysterical spontaneous paralysis. These symptoms were transmitted to the hypnotized patient, but continued in the patients who exhibited them. After two consecutive experiments an improvement was observed in one case of spontaneous paralysis. In a case of hemiplegia following an hysterical attack, M. Babinsky succeeded in causing the disappearance of paralysis after four consecutive experiments, such as above described. A method of treatment is thus determined. The author has proved by other experiments that hysterical symptoms are not the only ones capable of transmission. He succeeded in transmitting other symptoms, such as paralysis, tremor, etc., combined with organic changes of the nervous system. In these experiments, made in Dr. Chareot's ward at the Salpetriere, suggestion or simulation was carefully avoided.—*Med. News.*

GOITRE.— Fill a bag large enough to cover the hypertrophy with chloride of sodium, moisten this and bind around the throat before retiring. Take four times a day .3 grains of Gunther's goitre powder. We have cured several cases with this treatment in from two to four months.—*Med. Call.*

IODOFORM.— It is claimed that balsam of fir completely disguises the smell of iodoform. A mixture of one part of finely powdered camphor with three parts of iodoform is said to destroy the odor completely. Freshly roasted coffee has been used for the same purpose.

FOR REMOVING GREASE —The following is excellent for removing grease: Alcohol, 2 ounces; ether, 1 drachm: ammonia, 2 drachms.

EDITORIAL

A SYLLABUS OF PHYSIOLOGY.

DESIGNED AS A BRIEF REVIEW OF THE SALIENT POINTS OF HUMAN PHYSIOLOGY.

By Joseph Adolphus, M. D.

CHAPTER I.

Definition.—1. Physiology is that science that treats on the phenomena of living things and endeavors to explain the laws that govern them. Its object is to establish these phenomena on the basis of natural science and to delineate their causes and the means by which they are brought about.

2. Physiology naturally includes *Biology*, which latter treats on the form, structure and organization of living things, and may be termed the doctrine morphology, while physiology may be termed the doctrine of the vital phenomena of living things.

3. *Organisms.*—Living things are called organisms, because (*a*) they are chemically and physicially complex in the arrangement of the molecules that compose their structure, which is true of the very lowest (protistœ, amæble, etc.) up to the highest, including complex vegetable and animal organisms, which latter embrace the higher animals and man; (*b*) the highest vegetable and animal organisms are highly complex in the architecture of their bodies, which are made up of differentiated tissues and organs, each of which have a specific function to perform to ensure and maintain the wellbeing of the organism as a whole; (*c*) all organisms are continually undergoing chemical, physical and vital changes, the phenomena of which are termed the functions of their organism.

4. *Animal and vegetable.*—The two grand divisions of physiology is into animal and vegetable simply because the organic world assumes these two forms. No radical distinctions or sharp lines have been successfully drawn between the life forces that preside over the organism of plants and that of animals, in point of fact we find that many functions of livlng things are common to vegetables and animals, such as resperation, assimilation, nutrition, growth, reproduction, etc.

5. *Matter.*—The entire visible world, yea, the universe, in-

cluding all inorganic and organic things, consists of matter or substance, and occupies space. We distinguish *ponderable* and *imponderable* matter. The former is capable of being weighed, measured, divided. Imponderable matter is known as *ether*, and pervades all space and surrounds the atoms of which matter is composed. It participates in all the vibrations of atoms, transmits light, heat, electricity, etc., by which our senses recognize them. There are no sharp lines drawn between the two.

6. Atoms are the ultimate units of matter, and are incapable of division, cannot exist by themselves in a free state, are of infinite minuteness so as to entirely illude our aided senses. They are in a perpetual state of movement, attracting and repelling each other, manifesting sympathies and repulsions, so that by their perpetual vibrations they reveal their molecules to our senses. All the phenomena of the world, the varied aspects and conditions of nature, are owing to the unceasing changes of position and relation of atoms. They have certain special attributes—*indistructibility*, impenetrability, mutual attractions and repulsions, unceasing movement. In organic matter, the relation of atoms with each other is much more unstable, hence, is liable continually to assume new relations, than is the case in the inorganic.

7. *Molecules* are the smallest amount of matter that can exist in a free state. Contemporary chemistry recognizes sixty seven different elementary bodies, each having specific physical qualities as to weight, volume, affinities and repulsions. We have reason to believe that the atoms of each of these elements will group themselves in a particular way, and in various numbers, to form molecules, which are themselves of infinite smallness; these molecules aggregating from tangible matter, either solid, fluid or gaseous. Molecules, from the very mobile nature of their atoms, are essentially destructible, yielding to the shocks of outside forces in collision with them. It is the disaggregation and reaggregation of molecules that give to matter its various forms and conditions.

8. *The relation of imponderable aud ponderable atoms.*— The atoms of ponderable matter arrange themselves in a definite relation to each other and to the atoms of ether or imponderable matter. The ponderable atoms attract each other mutually and the atoms of the ether as well, but the ether atoms repel each other. As the ether atoms pervade ponderable matter and entirely surround ponderable atoms, the latter are unable to touch

each other owing to the repulsion of the atoms of ether matter toward each other, hence all masses of ponderable matter are porous, the atoms forming interstices, because the ether atoms will not allow the ponderable atoms to cohere, hence we see how the atoms in matter are loose, mobile, ever vibrating; hence the arrangement of the molecules of matter partake of the mobile nature of their atoms.

9. *Inorganic and organic matter.*— Notwithstanding the diverse appearances in form, texture, etc., presented between inorganic and organic substances, modern chemistry says that no sharp or radical lines can be drawn between these two grand divisions of nature in the laboratory. The elements of the one are common to the other. In point of fact, it is known that the properties of substances are owing to the number of their atoms and to the simplicity or complexity of their arrangement and the aggregation of their molecules.

10. *Colloidal and crystaloidal bodies.*— (*a*) Colloids embrace albuminous and gelatinous bodies, the proteids in fact, also starch, gum, dextrin, sugar, etc. On account of the large size of their molecules, colloids do not dialyse readily, that is, pass through membranes by endosmosis and exosmosis. They are not really soluble in water, and yet are reduced to solution by the catalytic action on them of certain organic ferments and are thus made diffusible to enter the organism as food and to build up and repair the wastes of the living tissues when they are again reduced to crystaloidal state. Were they readily soluble, the tissues could be easily broken down, dissolved and washed away by the fluids of the body. The colloids are complex organic compounds, therefore the best adapted to carry out and maintain the intense instability and dynamic energy of living things. (*b*) Crystaloids are substances soluble in water, and diffuse and pass readily through membranes. They penetrate with ease all colloids, and incorporate themselves in the interstices of their molecules. Moreover, it is known colloids can, by slow combustion, be converted into crystaloids. It is by this process of slow oxidation that colloids are reduced to crystaloids in the living organisms.

JOHN B. DANIEL still holds his large and extensive trade, which is increasing in all directions. Mr. Daniel is a fair dealer and a liberal man. Give him a call.

THE ECLECTICS OF ALABAMA.

WHEREIN THEY SET FORTH THE RIGHTEOUSNESS OF THEIR CAUSE AND THE INJUSTICE THEY SUFFER AT THE HANDS OF THEIR ALLOPATHIC ENEMIES.

To the honorable Senate and House of Representatives of Alabama, in General Assembly convened:

The undersigned, your memorialists, would respectfully represent that the law entitled "an act to regulate the practice of medicine in Alabama" (secs. 1528–35 of the Code), approved February 9, 1877, is class legislation, because —

1st. It confers exclusive privileges on an association of physicians (a close corporation), the Medical Association of the State of Alabama.

2d. It establishes a State medicine and State physicians of one school of medicine and physicians.

We would further respectfully aver that this law is unconstitutional, because —

1st. It confers on said association the power to legislate on medicine, and regulate and control the practice of medicine in Alabama.

2d. It confers on said association judicial powers, thereby establishing courts unknown to the law of Alabama, by clothing irresponsible examining boards, established by an irresponsible medical association, with powers plenipotentiary to sit in judgment on the qualifications, ethical, scientific and dogmatic, of physicians desiring to practice medicine in Alabama, and to deprive them of a property right which they hold in their diplomas, acquired by study and attendance on medical lectures, according to the requirements of law, in medical colleges chartered and established by law, and for which they have paid a moneyed consideration.

Said medical law provides no redress for grievances except to a political body, the creation of said medical association, thus conferring exclusive privileges and great powers on said medical association, which is a close corporation and irresponsible, and which your memorialists respectfully aver are being used to the detriment of other schools of medicine, and the rights of other physicians and of the people of Alabama.

Your memorialists further represent to your honorable body that said medical association has established an office (State

Health Office) for the people of Alabama, unknown to the laws of Alabama, and elected to said office a chief officer of said medical association, and that said medical association and the said State Health Officer have perverted a legislative appropriation $3,000, made for the purpose of carrying into effect the health laws of Alabama, to the payment of a salary of said State Health Officer and in the interest of said medical association, making said appropriation not only valueless to the people of Alabama, but detrimental to the progress of medical science, the rights of other physicians and the people of Alabama.

We further represent that the people never asked for such legislation, and that the legislature itself of 1877, which passed said act, considered it of such doubtful character as to expressly declare that said law might be altered, amended or abolished at any time.

For these and other reasons which your memorialists might mention, they most respectfully petition your honorable body to repeal said medical law, entitled An act to regulate the practice of medicine in Alabama, approved February 9, 1877, and place all physicians in Alabama on an equal legal footing to practice medicine according to their beliefs and the choice of the people, and your petitioners will, as in duty bound, ever pray.

R. J. THORNTON, M. D.,
W. H. LAMAR, M. D.,
J. W. R. WILLIAMS, M. D.,
Committee on behalf of Eclectic Association of Alabama.

ASCLEPIAS TUBEOSA

Is a vaso-motor stimulant. In its action the sympathetic is stimulated so that functionation of gland elements is regulated. As a marked feature of its action, we may recall the influence it exercises on temperature, cough and feeling of relief during pneumonia. We have no medicament that surpasses it in the treatment of acute croupous pneumonia for bringing about a modification of the severest symptoms. Under its influence there is a determination to the cutaneous structures, the kidneys and liver. No medicament equals it in bringing about a decided remission of the pneumonic exacerbation and gently merging the condition of the case toward a decided intermission, for we often find the temperature and frequency of pulse lowered, the cough and pain very much mitigated, the nervous system relieved of

the rasping high pressure that weighs it down, so that soon the whole train of symptoms of pneumonic fever are decidedly softened down and the skin becomes soft and secreting.

The medicament has a decided sedative or rather soothing action on the pneumo-gastric and its laryngeal branches. It soothes and relieves the irritation that excites these nerves in pneumonia, bronchitis, pulmonary consumption, etc. It is truly a soother of those nerves and structures that cause cough in chest diseases.

Asclepias tuberosa is a fine uterine tonic, relieving engorgements of the uterus and favoring the advancement of the condition that obtains in normal menstruation. Consequently we find it a good medicament in menorrhagia from congestion, and also of over-excitement of the ovaries. It is equally valuable in passive congestions, and thus cures passive menorrhagia. It relieves the over-excitement of the functionating nerve elements of the uterus, and in this way cures dysmenorrhœa.

In measles we have no medicament that so nicely soothes the bronchial mucous membrane and the larnygeal nerve, and so ward off the danger that the disease threatens these structures with.

Its action as a cholygogue is not insignificant; in fact, is one of its prominent properties. There is no question about this medicament being a stimulant of excito-secretory nerves, and of the vaso-motor centre as well.

EVENTS IN A CARDIAC CYCLE.

The filling of the auricles from the great veins is a passive state for both the veins and the dilation of the auricles. During the filling of the auricles, however, the ventricles are just concluding their contraction, and a moment arrives in which, at or about the end of the passive state of the auricles, the ventricles are just beginning to become passively dilated and thus a certain amount of blood passes into them from the auricles just before the auricles begin their contraction. The contraction of the auricles being very brief, that is, the time occupied in the muscular act of expelling the blood out of their cavity being 0.1 of a second.

At the very moment the auricles are about to commence their relaxation, the ventricles have fairly started on their contraction, so there is a brief, very brief, period when both auricles and ven-

tricles are contracted. The duration of a ventricular contraction from commencement to end of each act, may be set down as being about 0.3 of a second.

The duration of the contraction of the auricles from beginning to end may be set down about 0.1 of a second. This shows us that the ventricles, having to force their blood against high pressure resistance, consume a longer time in carrying out a complete systole.

Now, we may analyze a ventricular systole as follows: Time consumed in systole previous to opening of semilunar valves 0.085 of a second; time consumed in blood escaping through semilunar valve, 0.100 of a second; time consumed in continued contraction to enable semilunar valves to adjust themselves so as to prevent regurgitation, also as a protection against the heavy recoil of blood in the already overfull arteries, 0.115 of a second. Therefore we see that the ventricular systole commences suddenly, then slowly reaches its maximum, and finally suddenly comes into diastole.

The diastole of both auricles and ventricles lasts about 0.4 of a second. Before the ventricles contract again, the auricles commence a systole which lasts 0.1 of a second. Putting these last two points together we find that the ventricular diastole or pause of the heart consumes 0.5 of a second. About this is the period of rest. When the heart beats fast these rest periods are shortened proportional to the frequency of the beat. This is one of the dangers that attend long continued fever, that is, the heart has little rest. Exhaustion and collapse are consequences.

PATRONS OF THE CONGRESS.

The second official circular of the International Medical Congress begins thus:

Ninth International Medical Congress.

PATRONS,

The President of the United States,
THE HON. GROVER CLEVELAND.
The Secretary of State,
THE HON. THOMAS F. BAYARD.
The President of the Senate of the United States,
THE HON. JOHN SHERMAN.
The Speaker of the House of Representatives,
THE HON. JOHN C. CARLISLE.

Now, by our faith! is not that a pretty piece of toadyism and flunkyism to flout in the face of one of the largest and most influential of the learned professions? Because the British Congress could not feel itself properly opened until H. R. H., the Prince of Wales (a royal roue) gave his gracious assent, the American Congress must place itself in the same lick-spittle attitude, and beg those in high places to graciously lend their names as patrons.

Patrons of what and in what manner? "It 's English, you know; so English, you know," and we must ape the manners of the profession in England, the members of which occupy a position a little above that of family servant. As if the names of those distinguished members of our profession at home and abroad who will attend and take part in the work of the Congress were not enough to lend sufficient eclat to the occasion; but the managers, or some of them, have to lug in as patrons the names of some prominent politicians, who probably care but little for the profession, and who would consent as readily to attend some State fair or stock show and award the prizes to the biggest pumpkin or fattest steer.

We mistake the feeling of the medical profession if this uncalled for and unexpected attempt at toadyism is not severely sat down upon.—*Peoria Medical Monthly.*

[THE Congress will, no doubt, be the highest, biggest mass-assinine show, and equal to any dog show, that has had a local habitation and a place in the United States. The Old Code Allopaths are natural quacks. Don't you see the point? The bigot and the fool seen in the same net.—EDITOR.

QUININE INUNCTION.—The quinine should be rubbed up in a mortar to an impalpable powder; next mix it with cod-liver oil in the proportions of 1 to 4. Four grains of quinine may be worked into a young child's system at one rubbing. Repeat in four hours, if the case is one that needs large doses should be introduced into the blood rapidly. In acute diseases, inunction with quinine will be found of great service, especially in the cases of children and young people, the quinine actually becoming a restorative to the exhausted tissue functions. In fact, it is quite probable that it acts as a restorative, and even a food, to the nerve centres, and in some way controls the destructive processes going on in the organism during protracted heat dis-

ease. Quinine inunction is unequaled as a remedial means in the treatment of chronic wasting diseases of children. Used with cod oil the beneficial effects of both agents are simultaneously obtained. There is good reason for believing that cod oil can be in this way very advantageously put into the tissues. Before each inunction the skin should be well cleansed with a weak solution of ammonia in warm water, care being taken not to make the skin sore by using too strong a solution. In place of ammonia, the skin may be cleansed with a solution of borax in warm water. When the skin is well cleansed before each inunction, the oil and quinine are more readily made to pass through the outer epithelial covering and penetrate down to the lymph paths and capillary network that is so rich in the dermal covering.

Quinine is more sure to be of real service to the system in chronic cases of impaired nutrition and in acute wasting diseases, as cholera infantum, pneumonia, remittent and typho-malarial fever, etc., than when administered by the mouth. Do not use vaseline or glycerine as the adjuvant, nor rancid or frouzy lard. Clean, fresh lard will answer finely, and butter may if quite fresh and freed from milk casine, otherwise it turns rancid in the skin before it is absorbed, and irritates it. Cod oil, all things considered, is the best menstruum for carrying quinine into the system by inunction, because it is quickly absorbed.

We have repeatedly seen quinine produce its antiperiodic and antipyretic effects by inunction. A child will go through an attack of wasting disease much more smoothly—suffer less purturbation and waste—when several grains of quinine are introduced into its system in this way, than when not so treated.

Quinine is soluble in cod-liver oil to some extent. It is soluble in the fluids of the lymph paths, and there is no doubt that the fine particles can pass into the lymphatics and blood vessels without first undergoing solution.

THE ALLOPATHS OF GEORGIA are concocting a conspiracy to obtain from the Legislature of the State a medical law similar to that of Alabama. We learn that the head centre man of the Alabama Board of Health has been invited to come to Atlanta to help the Georgia Allopaths through with their little job. The Allopathic Medical Society of Georgia has the entire thing planned out, and the pipes laid to carry through the conspiracy.

When the day for action comes, the Allopaths of Georgia will

find stern stuff to confront. But Georgia is not Alabama by a long shot. The people of this State have no use for trades-union legislation of any kind. Georgia has the best medical laws in the United States. The colleges are forbidden, under a penalty of $5,000, for each offense, to graduate parties who have not taken *two full courses of lectures and submitted to a searching final examination by each member of the Faculty.* These are also the terms of the charter under which the Georgia College of Eclectic Medicine is so successfully working. The State law further defines what shall constitute a course of lectures, in plain terms, and attaches a penalty for its violation. The laws satisfy both the people of the State and the major part of the entire medical profession within her borders. None but the cranks and partizan bigots desire to supplant the present satisfactory state of things with such laws that now disgrace the State of Alabama.

All this kind of legislation is utterly unconstitutional, and sought for only by ignoble partizans.

We await events, abiding in the faith of "sufficient unto the day is the evil thereof."

OFFICE OF CORRESPONDING SECRETARY
OF THE TEXAS ECLECTIC MEDICAL ASSOCIATION,
Davis, Tex., December 8, 1886.

Eclectic Physicians in the Eastern States wanting locations in Texas will please correspond with the undersigned at Davis, Tex., stating the kind of location that they want—whether in city, town, village, or hamlet, and he will assist them in making selections.

J. E. A. BALL, M. D.,
Corresponding Secretary T. C. M. A

OFFICE ASA G. CANDLER & CO,
P. O. Box 516. Wholesale Druggists, 47 Peachtree street,
Atlanta, Ga., December 7, 1886.

DR. J. ADOLPHUS,
Editor Georgia Eclectic Medical Journal, Atlanta, Ga.

DEAR SIR: We are pleased to notice, among other good things that appear in the Journal, a card of Messrs. Sharp & Dohme, manufacturers of Fluid Extracts and other fine Pharmaceutical preparations.

As you perhaps are aware, we are the General Agents in this section for Messrs. Sharp & Dohme, and, as such, carry in stock

constantly their entire line of goods to the exclusion of all other competitive lines. They were selected by us after carefully considering the merits of the various goods of this kind now being manufactured, because of their uniform superiority, and we have not had, so far, reason to regret our choice, as we are selling large quantities of the goods to the utmost satisfaction of our professional patrons.

We should be glad to know that the profession generally are confining themselves to the use of a class of goods made as these are, strictly according to U. S. Pharmacopea directions.

Wishing you success in your enterprise, we are,

Very truly yours,

ASA G. CANDLER & CO.

THE COLLEGE is having a prosperous and profitable session. Both faculty and students are in accord, and manly, earnest rivalry prevails among the members of the class to see who best can work and reap the richest rewards for the labor and money expended in the effort to be qualified to fill the high station the profession and people award the best men. In the class is a gentleman of high culture in literary lore, who attended his first course in Baltimore, Md. This gentleman says he has received more practical and useful instruction since he has been in attendance in this college than he received in the five months he remained in Baltimore. Our curriculum, he says, is as good as the Baltimore school affords. We mention these facts merely in illustration of the earnest work that is being done in the Georgia College of Eclectic Medicine and Surgery. The faculty are earnest, competent men, who make their work their pleasure and their pride, and the status of the class is a fair evidence of the success that attend the labors bestowed by the teachers.

THE petition of the Eclectic physicians of Alabama to the legislature of that State for a repeal of the trades-union medical laws of that State, is an able, manly and straightforward paper that will not fail to elicit the serious attention of the legislators. The allegations and argument set forth against the constitutionality and equity of the law, are as irrefutible as they are damaging to the claims and pretensions of the Allopaths. Georgia has the best medical laws of any State. Our law works well and gives general satisfaction to all schools of medicine and to the

people. No valid objection can be found to it, and those who would repeal it are simply the bigots and the cranks. The Alabama law is a disgrace even to the Allopaths, and had they good sense would be ready for its abolition.

THE ESSENTIAL NATURE OF RELIGION. By J. Allison Picton. Price, 15 cents. J. Fitzgerald, publisher, 108 Chambers street, New York. The author of this profoundly philosophical essay holds that in the relation of our personal life to the world about us is found that which insures to religion an adequate scope and a permanent place, under all fairly conceivable revolutions of thought; and that though Religion may be called by many names, its essence is recognizable in all the highest activities of human life, even where these have been condemned as irreligious and impious. We recommend our readers to procure this valuable work, from which they will certainly derive instruction and pleasure.

THE AMERICAN MEDICAL JOURNAL, which has been so ably conducted by Prof. Geo. C. Pitzer for fourteen years, has been transferred by him to his distinguished colleague, Prof. Edwin Younkin, who will in future wield the pen editorial and assume all the functions of the man at the helm of the "American." We send forth our congratulations to the new editor, who is, as many of our readers may be aware, an able writer and an excellent surgeon. The "American" has achieved fame and success under the fertile pen of its former editor and manager, which we have reason to believe will be fully maintained by Prof. Younkin. Correspondents will in future address their communications to Edwin Younkin, M. D., 1015 Garrison ave., St. Louis, Mo.

PURE MEDICINES.—It is useless for physicians to try and practice successfully if they have not remedies that can be relied upon. Especially is this the case in our school, which uses so many vegetable remedies liable to be spoiled by careless collecting and improper preparation. Those who use Lloyd Bros'. Specific Medicines never have causes for complaint. Dr. Robert C. Bryan, Perry Co., Ga., writes that had it been his privilege to have employed them when he began practicing forty year ago, he is satisfied, so successful has he been in obtaining reliable results from their use, that Allopathy would now be dead in his section of the country.

IRIS VERSICOLOR is a valuable medicament in many skin diseases of the eczematous and herpetic types. The success attending its use in skin diseases is often wonderful. Gradually increase the dose, starting with 1 or 2 drops of a good tincture or fluid extract, repeated three times a day, until the bowels are slightly moved; then fall back to such a size dose that will not disturb the bowels, but occasionally raise the dose slowly to move the bowels slightly. Nearly all these forms of skin disease are in some way associated with some wrong in the functions of the liver.

IODINE IN MILK.—Administer this medicament in milk, by dropping 4 to 20 drops in half a cupful of this fluid, which will be found the best way of working this valuable medicament into the system of children. It is, administered in this way, free from irritating properties to the stomach, and is very readily absorbed into the nutritive fluids of the body. In this way, scrofulous diseases can be well treated, other medicaments being brought into use as aids.

ANACHARIS ALSINASTRUM—a plant that grows in swamps and boggy places—is claimed to be a better preventive against malaria than the eucalyptus tree. It is planted in the wet soil and on the banks of lakes and rivers, where these are swampy, and as the plant grows and flourishes finely on these places it kills malaria in some way we can't explain.

A DIURETIC FORMULA.—Prof. Durham prescribes the following in nearly all cases of dropsy, from which he gets immediate curative effects. R. Powder of the root of apocynum canab, 5 grs.; pulv. squill, 2 grs.; potassa nitrate, 3 grs.; p. ginger, 10 grs. M. To be taken at one dose and repeated twice or three times a day, administered in an infusion of any mild herb, as catnip, smart weed, sage, etc.

THE William S. Merrell Chemical Company's Concentrated medicine, Alkaloids, Salts, etc., are of the first quality and as reliable as can be made. This firm is as solid as granite and fully up to the times in pharmacy. Lamar, Rankin & Lamar, of this city, are the agents for the William S. Merrell's preparations. The Alkaloids and Resonoids made by this house have no superior.

MYRRH,

though an old medicament, is more valuable than the average doctor anticipates. In the first place, under moderate doses of myrrh, the energy of the assimilating functions are increased, the number of blood cells is augumented, hence we are justified in pronouncing it a true tonic. There is a well-founded cause for the partiality the old Eclectics had for myrrh. Number six, or "hot drops," is a valuable remedy externally as well as internally, making a good dressing for wounds, erysipelas and inflammatory swellings. We have found the combination of No. 6, tr. of nux. and quinine a valuable remedy in atonic dyspepsia caused by gastric catarrh.

TONIC PILLS.

℞. Phosphide zinc; arsenic, aa 20 grs.; iron by hydrogen, 200 grs; gum myrrh, 400 grains. Put the first three in a mortar and rub them up thoroughly for several minutes, then add the myrrh, previously softened with glycerine and alcohol. Make into two hundred pills. The dose is one pill, three times a day, after meals. This is the best combination we have ever used in the treatment of anæmia, chlorosis, neuralgia, etc. It is a true hæmetic combination, seeming to stimulate and strengthen the functions of the blood-making organs. The quantity of myrrh may be increased.

MANGANESE AS AN EMMENAGOGUE.—Professor Thomas considers 2-grain doses of the biniodide of manganese, in pill form, three times a day throughout the month and including the menstrual period, as the best means to regulate the monthly flow. As to the time and amount, he also believes it to be superior to iron in chlorosis and anæmia.

ŒDEMA OF THE GLOTTIS.—Hot foot-baths, hot teas, and jaborandi are recommended by V. M. Reichard. He gives at a dose 1 drachm of the fluid extract, and if free salivation and perspiration do not occur in half an hour another like dose is given. Seldom is it needful to repeat the dose, and as salivation comes first, its advent is followed by relief and cure.

BEEF ESSENCE.—Cut in small pieces one pound of surloin or rump beef. Place, with half a pint of water, in a covered dish

by the side of a fire for four or five hours, then simmer gently for two hours. Skim well and serve.

BOVININE.—Bush's Fluid Food is a highly concentrated form of dissolved proteid food, free from the objectionable properties of many of the foods for invalids found in the drug stores. It is pleasant to the taste and smell, and in a form to be readily taken up by the blood vessels and lymph channels of the system; hence its great value in exhausted states of the system. Write to J. P. Bush Manufacturiug Company, No. 2 Barclay street, New York, for specimen, and mention the JOURNAL. See adv. in this journal.

EDITORIAL BREVITIES.

PARKE, DAVIS & CO.—Messrs. Pinson & Dozier, wholesale druggists, of this city, corner of Mitchell and Whitehall streets, are the agents of the above house in this part of Georgia, and keep in stock a full line of the preparations made by that firm. Their stock is always fresh, because the sale is very extensive and frequent renewals have to be made.

TILDEN & CO.—The preparations put up by this sterling old firm are as popular as ever. The Alterative, Elixir Iodo-Bromide of Calcium Compound is endorsed by many of the leading physicians of the United States and Canada. Send to Tilden & Co. for specimen samples of their valuable preparations, and mention the JOURNAL.

LISTERINE.—Send to Messrs. Lambert & Co., 116 Olive street, St. Louis, Mo., for a copy of their valuable formula book. Listerine is the fashionable and popular antiseptic of the day with a large class of physicians, because it is as safe and efficient, as well as pleasant, administered internally as when used externally.

SPECIFIC TINCTURES manufactured and sold by H. M. Merrell & Co. are coming largely into use in the South. Send to them for the valuable doseboard, which contains valuable and useful information to physicians. See their advertisement in this journal.

JACOB'S PHARMACY.—Joseph Jacobs makes a large variety of standard preparations, which have given excellent satisfaction in all cases where used. Many physicians we know will have none but Jacobs' make. He is as liberal as he is expert in pharmacy. Give him a call.

LLOYD BROTHERS.—The preparations of this firm are universally admired and praised for their purity, certainty of action and uniformity of strength. Write to them for their price-list, etc. See their advertisement in this journal.

POISON IN MILK.—Researches by Dr. Newton, published in Medical News, prove that milk warm from the cow, when placed in tight cans in a warm atmosphere, will so change as to develop poisonous ptomaines, sufficient to cause toxic symptoms in those using the milk.

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ORIGINAL COMMUNICATIONS.

A SYLLABUS OF PHYSIOLOGY.

DESIGNED AS A BRIEF REVIEW OF THE SALIENT POINTS OF HUMAN PHYSIOLOGY.

BY JOSEPH ADOLPHUS, M. D.

[CONTINUED FROM P. 387.]

Diffusion Endosmose.—(*a*) Diffusion is the attractive force subsisting between the molecules of two fluids (or gases) of various chemical nature and densities in virtue of which their respective molecules will intimately mix. Thus, if a strong solution of sodium chloride be placed in a glass tube and pure water carefully added so as to allow it to lie on top of the salt solution, and be placed at rest, in a short time the two fluids will be found to have intimately mixed. The law of diffusion implies that the two fluids are mixable. Thus water and alcohol diffuse readily; so does chloroform and ether. The fluids of the living organism are eminently diffusible.

The following points may be noted: 1. The density of the solutions must be unequal, the heavier always diffusing into the lighter. 2. Different substances differ in their diffusive properties. 3. Temperature favors diffusion between 60 and 90° F.; below retards. 4. Substances that do not chemically combine, when mixed in solution, may be separated by diffusion—the more diffusible separating from the least so. 5. The following table gives the approximate time of equal diffusion, hydrochloric acid being taken as unity: Hydrochloric acid, 1.0; chloride of sodium, 2.3; sugar, 7.0; sulphate of magnesia, 7.0; albumen, 49; caramel, .98. The numbers indicate the length of time equal quantities of the substances take to diffuse in water; albumen is forty-nine times *less* diffusible than hydrochloric acid and seven

times less than sugar or magnesia sulphate. Therefore being a colloid body it diffuses with difficulty.

(*b*) *Endosmosis and Exosmosis* imply the passage of two fluids of unequal density through the pores of a membrane when occupying opposite sides of it. E. g., if a strong solution of salt in water is placed inside a bladder, and if a tube half an inch long and one-sixteenth of an inch bore be made to pass into the bladder down to the fluid and tied in position, then, if the bladder so prepared, be immersed in a vessel of pure water at about 80° F., after a few moments the salt solution will be seen to rise gradually in the tube and the water in the vessel will be noted to decrease in quantity.

This little contrivance is a real endosometor, and when different substances in solution are placed within the bladder and it placed in water, similar to the experiment just named, it will be found that the fluids that rise in the tube will vary in the height to which they will attain, and the time consumed in rising will also be longer or shorter than that of a selected standard.

The law of endosmosis implies that (generally) the lighter fluids endosmose toward the heavier and the heavier exosmose toward the lighter; but these two currents are in opposite directions, the strongest being from the lighter to the heavier fluid, and *vice versa.*

(*c*) *Endosmotic Equivalent* of a substance is expressed by the number which shows how many parts, by weight of water, that pass through the bladder or membrane in exchange for one part of the substance, as is shown in the following table: Chloride of sodium, 4.3; sulphate of magnesia, 11.7: sugar, 7.1; sulphuric acid, 0.4; alcohol, 4.2; that of albumen is 18; hence, we see that for a given weight of salt, say one scruple, that pass out, 4.3 scruples or parts of water pass into the solution. For sugar it is 7.1 parts of water, and for albumen, 18 parts of water; therefore albumen is said to have a high endosmotic equivalent, and sulphuric acid a low one. The endosmotic equivalent increases with the temperature and the strength of the solution. We see that diffusion and endosmosis have a close relation to each other. All the fluids of the body are diffused and endosmose readily. Within the intestines during digestion are found relatively concentrated fluids, solutions of proteids, starch, gelatine, etc., brought about by the organic ferment of the stomach and glands, and solutions of various salts, and separating this fluid are the

walls of the intestines and capillaries of the blood and lymph system, we find that an active endosmosis takes place toward the blood and lymph which are comparatively poor in these constituents. Besides this, the moving blood washes away the endosmosed fluid continually keeping a fresh receptive fluid in contact with the outer wall of the intestine, thus promoting a constant and active endosmosis.

Dialysis.—When a colloid and a crystation are in solution together, the latter will dialyse through the membrane and leave the former nearly pure. This process is constantly going on in the organism in the process of assimilation and disassimilation.

Energy or Force may be termed the manifestation of the movements of matter. Force and matter are inseparable. Thus heat is a mode of motion of atoms; the entire vibrations affect our sense of feeling. To change heat into electricity is only an act of philosophic pastime, and this can again be turned into light. Movement is the life of matter and every atom in the universe is incessant motion, sometimes faster at others slower. The earth is whirling along in space with the other planets and the central star is the source from which emanates all the forces and phenomena we experience. Hence, we speak of light, heat, electricity, magnetism, gravitation, chemical affinity and vital energy as froces of nature. It is probable that none of these named differ in essential attribute from the one universal force that emanates from the sun and raises the water into clouds and sends it down again as rain, or intensifies the vortex of attractions and expulsions and governs us, the thunder and lightning from the clouds and the wondrous cyclones and sweet gentle breezes, make the grass to grow and the whole animated face of the earth active and moving.

Potential and Kinetic Energy. Definition.--Energy manifested as work in matter is termed *kinetic*; energy at rest or stored in matter is termed *potential.* Thus, a stone resting on the top of a building is in a state of potential because it is in a position to do work in falling to the earth, then, through the attraction of gravitation it is propelled to the earth with a force proportional to the height from whence it falls and its own weight. If the stone weighed one pound and it fell from a height of 772 feet, the impact of concussion on striking the earth would generate sufficient heat to raise one pound of water one degree F. A clock that is wound up but not running, is in a state of poten-

tial energy, no matter if the clock runs by weight or steel springs. Now, but a slight touch is sufficient to set it running, then it is kinetic energy, because it is doing work which is constantly generating heat and motion by the movements and friction of its wheels. The lump of coal in your cellar contains potential energy; place it in a furnace and heat it to redness, then it passes on into kinetic energy, it will run a locomotive, drive a machine or cook your dinner according to the relation it is made to sustain to a boiler of water and machinery connected therewith.

The total quantity of energy in the universe is invariable, neither increases or diminishes, but it is ever presenting itself in a vast multitude of ways as light, heat, motion, electricity, life, thought and work in endless variety and of varied intensity.

13. *Heat Unit* is the energy that will raise one pound to the height of 772 feet conversely; a pound weight falling from a height of 772 feet will generate by the fall heat enough to raise the temperature of one pound of water one degree F. This is termed the *mechanical equivalent* of heat or heat unit.

14. *Chemical Affinity* is the force that combines two or more atoms of unlike chemical nature into a compound body accompanied by the evolution of heat, electricity, etc. The chemical combinations of atoms into compound bodies are continuously going on in the living body, hence are a sorce of energy. Thus, the oxidation of the food in the organism converts it into C. O_2, H_2 O, urea, etc., all of which are effected in the presence O from which results heat, movement, etc.

15. *Plants and Animals.*—Plant life is essential to animal life because it alone can elevate mineral matter from the inorganic to the organic scale of nature. Plants are endowed with the wonderful powers of assimilating C. H. N. O. S. P. K, Na., Fe., Si., Ca., etc., into living tissue by virtue of the function of their chloropyllian cells animated by the *actinic* rays of the sun. To plants belong the energy of synthesis, of a high constructive metamorphosis, of arranging atoms into complexly built up molecules, thus creating complex compounds endowed with mighty and potential energy from which animals derive their kinetic energy—heat, organic functions, etc.

The organic compounds formed by plants have their chemical affinities but slightly satisfied by O, and, therefore, they manifest a powerful tendency to take on decomposition, that is, to return to the mineral state by higher oxidation whereon their kinetic

energy is let loose. Animals eating plants, oxidize their food by the O, taken in by respiration and thus convert its potential into kinetic energy. Hence, we say animals are machines that work up in their bodies the potential energy of their food, which, even in carnivorious animals, is derived directly from plants, into kinetic energy, the effect of which is again to mineralize the principles and restore them to earth again.

16. *Life—Vital Force*—is the sum of activities manifested by atoms complexly arranged chemically, physically, electrically, etc., which are ever manifesting phenomena of action, but these actions are always tendencies to assume simple arrangements and affinities, e. g., to return to the mineral state from whence they were elevated.

Thus, the chemical construction of olein is C_{57} H_{106} O_6, proteid is C_{52} H_7 O_{21} N_{15} S O_8. These are complex atomic aggregations, examples of organic structures. One special feature worthy of note is the comparatively small quantity of O they contain compared with their large quantities of C and H; hence, they are immense magazines of potential energy, because they are capable of readily attracting O and forming new combinations by which acts intense kinetic energy is evolved. These substances on entering the organism of animals are intensely acted on by the O of respiration and soon converted into CO_2, H_2 O, C N_2 H_4 O_3, leaving the body fully oxidized, e. g. nearer the mineral state. It is these transmutations, this blending of atoms anew in the presence of O, H_2 O., etc., that give place to the kinetic phenomena manifested by living things. The work is performed in the living cells that constitute the organic being. Therefore, the cell is a laboratory of intense chemical and physical activities. The sum thereof is the living phenomena.

CHAPTER. II.

1 *The Blood*, when circulating through the living body, is seen to consist of an almost colorless fluid (plasma) in which are suspended the corpuscles (red and white). It is the nutritive fluid of the organism, the internal medium that conveys to the anatomical elements the nutritive material of the food previously dissolved in the alimentary tract by the juices thereof, and the O taken ftom the atmosphere through the lungs. On the other hand, it receives and conveys away to the excretory organs, to be expulsed from the organism, all the residual and effete materials

that are of no farther use to the organism. As a matter of fact, it is constantly undergoing impoverishment and as constantly renewing its stores of nutriment and gas. Hence, so long as life lasts, there is a constant double current, one to the tissues from the outer world through the blood for the renewal of their substance and maintainance of their energies, and one in the opposite direction—from the tissues to the outer world, through the blood, for removal of the products of disassimilation.

2. *Color.*—Arterial blood is a bright crimson, venous blood is a dark purplish blue, and even nearly black, especially in the hepatic and renal veins. This change of color is owing to the action of O on the hæmoglobin of the corpuscles, which it converts into oxy-hæmoglobin (arterial blood) while passing through the lungs.

3. *Opacity.*—The blood is opaque, even in a very thin stratum, or film, which is owing to the refractive powers of the plasma and corpuscles being very opposite, so that the light is refracted by them in opposite directions.

4. *Reaction.*—The blood is alkaline in reaction, owing to the presence in it of disodic phosphate (Na_2, H, PO_4). Shed blood soon becomes acid owing to decomposition of the coloring matter of its corpuscles.

The alkalinity of the blood is diminished by severe muscular exertion, owing to the development of muscle acid.

5. *Odor.*—The odor (*halitus*) of the blood is owing to the development of some fatty acid in it (caproic?). Each species of animals has its peculiar odor.

6. *Taste.*—Saline, owing to chloride of sodium and other salts in the plasma.

7. *Specific Gravity*, within normal limits, may range from 1045 minimum to 1075 maximum; average, 1055.

Of the corpuscles, (specifically heavier) 1105; of the plasma, (specifically lighter) 1027.

8. *Temperature.*—Average, 100° F.; in the hepatic vein 100.1 to 1007; in the aorta, 990 to 100.5°; in the right autricle, 102.2° F.

9. *Quantity.*—About 1-13 the weight of the body in the adult, in the normal state; in the new born infant about 1-19 the body weight.

If the umbilical cord is ligated immediately, and before its pulsations cease, the body of the child can be deprived of

several ounces of blood and the corpuscles are thus notably diminished.

The quantity of blood is increased after taking food and diminishes during the intervals. Good food, in sufficient but not excessive quantities at stated intervals, maintain the general normal standard, while fasting and disease diminish it.

A vigorous digestion, good wholesome food, proper exercise and sufficient sleep are the requisites to the maintainance of the blood up to the normal standard, and, as a matter of course, the standard varies in different individuals.

10. *Plethora* is an increase of the proteid constituents of the blood. Causes—a vigorous digestion, abundance of proteid food, especially animal, too little muscular exertion. There is a florid and often bluish red color of the skin, swollen veins, heavy blood pressure, vigorous systole, hard pulse, vertigo, oppressive respiration, injection of the capillaries of the mucous membranes.

Treatment.—Reduce the animal food, live on vegetable food in large part, succulents and fruits, exercise in the open air, drink largely of water, avoid alcoholic, fermented and vinous beverages.

11. *In anæmia*, especially of chlorosis, the proteids of the body are oxidized, as in starvation, along with the red globules and a high rate of urea excretion obtained, but the relative destruction of fat does not obtain at the same time. Thus, fatting animals kept in the dark and bled occasionally put on fat but destroy the proteid substance of the body. The treatment adapted to anæmia is, to promote the activity of the digestive and assimilating organs for proteids, fats, etc. Plenty of O particularly during the sleeping hours, remaining in the open air and sunshine much of the day so as to increase the hæmogloblin of the corpuscles of the blood. Aids—iron; phosphorous, strychnine, quinine, hydrastis, euonymous, iris vers., ammonia muriate, acid hydrochloric, cod-liver oil, malt extracts, etc.

The food must be rich in proteids, as beef, mutton, fowl, fish, properly cooked, taken in moderate quantities and combined with fat as cream, fresh butter, salid oil, starchy food well cooked and given with malt extract.

Distribution of the blood through the body.—One quarter circulates in the skeletal muscles; one quarter in the heart and blood-vessels; one quarter in the liver, and the balance in other parts.

Coagulation of the Blood.—When blood is shed it rapidly co-

agulates, e. g. the blood dies and some of the fluid constituents are converted into fibrin, which is the cause of coagulation. The phenomena of coagulation may be presented as follows: The shed blood rapidly passes from the fluid to the viscid state. It then rapidly becomes thicker and at last solidifies into a uniform trembling gelatinous mass throughout, of a dark red color, which adheres to the containing vessel with tenacity, so that when held upside down not a particle falls out. In a few minutes more the surface of the mass will be seen to be "cupped," and soon be filled with drops of a straw-colored transparent fluid that oozes out of the solid clot. This fluid goes on collecting in quantity from minute to minute until the mass separates into two constituents—*serum* and clot or crasamentum, the clot having shrunken by virtue of the elastic contraction of its fibrilla and squeeze out the fluid part or serum and separate itself from the side and bottom of the containing vessel. The longer the clot and serum are allowed to stand, under favorable circumstances (moderate temperature, quiet, etc.), the more the serum increases in quantity and the smaller and denser the clot becomes until putrefactive changes set in. The serum exceeds the clot in bulk, but more so in anæmic than normal subjects. Coagulation usually commences in human blood in ten to fifteen minutes after it is drawn and is complete in about twenty minutes, but the process of separation of the serum and clot continues through ten or twelve hours, being longer in cool and shorter in warm weather for obvious reasons. The slower coagulation goes on the firmer is the clot.

(*a*) *The Buffy Coat* is caused by the time allowed for the red corpuscles, which are specifically heavier than the leucocytes, to settle away from the surface of the blood before extreme viscidity sets in. When this is somewhat tardy in reaching its acme, the corpuscles settle away from the surface leaving the leucocytes, which latter are caught in the surface fibrin and so give the "cupped" stratum a "buffy" coat, but when coagulation proceeds rapidly, there is either no buffy coat or very little is developed.

(*b*) *Defebrinated Blood.*—If shed blood is vigorously stirred up or "whipped" with a bunch of twigs as soon as it is drawn, the fibrin as it forms adheres to the twigs so that it may be removed piecemeal leaving the serum and globules. Washing the removed fibrin in water to free it of red globule leaves the former

a grayish elastic substance, fibrilla in structure, when dry, horny.

(*c*) *Importance of Coagulation.*—All wounds and injuries of the textures of the body would ultimately cause death in a few hours by constant leaking of blood through the small vessels on which ligation could not be applied, were it not that the blood, after a short oozing, finally coagulates in the mouths up to the nearest anastomotic branches and thus acts as little plugs, closing the orifices of the bleeding vessels; in this way even fairly large vessels are plugged up by nature, when wounded, and so prevents fatal hemorrhage. Torn vessels bleed less than smooth cut ones, the ragged edges acting as points that provoke coagulation.

(*d*) *Coagulation* is hastened when the blood is brought in contact with all foreign substances. Thus, needles, thread, etc., passed into a blood vessel cause fibrin to be deposited upon them. Pathological conditions of the inner coat of the vessels cause fibrin to deposit about them. Ligation of a vessel, when the inner coat is even but slightly injured causes fibrin to form a plug at the seat of ligation in front and behind; hence, ligation of arteries cause their occlusion. Arterial blood coagulates more readily than venous, so blood from inflamed parts. Rough and uneven surfaces, as sand, cloth, also of the containing vessel hasten coagulation tempreature. The blood of birds coagulate rapidly, that of the pig, sheep, rabbit next, of the dog and ox, and horse's blood very slowly; man's blood coagulates in fifteen to twenty minutes.

(*e Coagulation is retarded by cold* 32° to 33° F., by solutions of the alkalies, and of neutral salts, for example, chlorides, sulphates, phosphates, etc., especially magnesia sulphate, also the addition of weak acids. Blood of the hepatic and renal veins coagulate not at all or very slowly; so of menstrual blood.

(*f*) *The clot*, when examined under the microscope with a high power, is seen to be of a filamentous texture of delicate fibres, straight, crossing each other in every direction, in the meshes of which the corpuscles, red and white, are entrapped.

(*g*) *Quantity of Fibrin.*—Massive as the clot appears, its proportion of fibrin does not exceed 0.2 to 0.3 per cent. in the blood.

MY POCKET CASE — CONTINUED.

BY I. J. M. GOSS, MARIETTA, GA.

Euphrasia.—This is our remedy for inflammation of the eye. Dose, 5 gtts. every two hours of the saturated tincture of the fresh plant. It is also a remedy for catarrh. Nasal catarrh may be aborted by using this internally, and first dec. dilution locally with an atomizer. In hay fever it is of much utility, especially in that form in which there is a profuse discharge from the nose, and profuse lachrymal discharge. It is also of utility in the acute coryza of measles

Fucus Marina.—This is an anti-malarial remedy of high power, lately introduced. When quinine is contra-indicated, I use this drug, in doses of 60 gtts. every three hours during the interval between each paroxysm of fever. In chronic malarial poisoning, this remedy acts more promptly for me than quinine. I use Peacock's Company's preparation, of St. Louis, Mo. If the liver or spleen is enlarged, I use a pill of podophyllin, ¼ grain; euonymin, ½ grain; extract colycynth comp. ½ grain; cascra sagrada (Rhamnus purchiana), ½ grain. This is one dose at night.

Equisetum Hyemale—Scouring Rush.—The scouring rush is one of our best diurectics, and it possesses an astringent and anæsthetic effect, by which it readily relieves hyperæsthesia of the bladder. The dose is 30 to 60 gtts. of the fluid extract, three or four times a day. This is a very positive remedy in irritable bladder. If the irritability depends upon acidity of the urine, then the above drug should be alternated with carb. of lithia.

Erigeron Canadense—Fleabane.—The oil of erigeron is a mild diuretic, but it is also a most powerful hæmastatic astringent. In hemorrhage from the uterus, this, with essence of cinnamon, has proven almost a specific with me. The dose of the oil is 5 gtts. I usually make the tincture by adding 1 ʒ of the oil to 9 ʒ of alcohol; the dose then is 30 to 60 gtts. every hour or two.

Eucalyptus Globulus—Blue Gum Tree.—The oil and the saturated tincture or the fluid extract of the leaves are anti-septic in a high degree, and, as such, capable of a wide range of action. It is useful in ulceration and catarrhal affections, etc.

Euphorbia Pilalifera—Snake Weed.—The fluid extract of this herb (which is a native of Australia and the West Indies) is a very valuable remedy for catarrh and asthma. It is regarded as

a specific in colds in its native habitat, and also a remedy for bronchitis. Dose, 1 to 2 ʒ every hour.

Evening Primrose—Œnothera Biennis.—Preparation used: The fluid extract of the flowers and herb. Dose, ½ to 1 ʒ three times a day. This remedy has proven very prompt in the relief of asthma associated with gastric irritability. It is a mild, but efficient, sedative to nervous sensibility, especially irritability of the pneumogastric nerve. Where there is gastric irritability, with reflexed irritability of the respiratory nerves, the œnothera is of special utility. It matters not whether the morbid sensitiveness is located in the laryngeal, pulmonary or bronchial branches, or whether there be acute or chronic inflammation associated with the irritability, still this drug is indicated. It is worthy of a trial in whooping cough. I have used it frequently, with other drugs of its class, with happy effect. It is a very valuable remedy in tetter, as a local remedy.

AMENORRHŒA—EMACIATION IN PHTHISIS—MAGNESIUM PHOSPHATE IN COUGH OF PHTHISIS, ETC.

BY W H. HALBERT, M. D., LEBANON, TENN.

AMENORRHŒA.—Mrs. X. had been quite unwell for two months, suffering with headache, pains in the back portion of the head; acute pains in the back and hips; dull aching pains in the back portion of the thighs and legs; bowels constipated; urine scanty and high colored; morning range of temperature 102; uterine tenderness; tenderness very great over the bowels.

This patient had been delivered of a child sixteen months previous to this. The child was still nursing She had been suffering as described above for several weeks and had never menstruated since she became pregnant. I gave her ferri phosphate 2.x., grains ij; with iv ounces of water. Dose, a teaspoonful every hour. Second day, patient still suffering very much, except her head is almost perfectly easy. Ordered the child weaned and gave spe. tinct. veratrum vir., *m.* vii; spe. tinct. macrotys, *m.* x; water, ʒ iv. M. Sig.—Give one teaspoonful every hour all day and until 9 o'clock at night, and then a hot foot both. Third day, patient rested better, no pains except lightly in the hips and uterus; uterus still quite tender. Gave the same treatment as the day before; the patient passes a good

day and night, and, consequently, she was feeling quite well the fourth morning, except the short, dry, hacking cough she had for several weeks. This cough made her very uneasy as her father and mother had died of consumption. For this cough I gave her ferri phosphate 2. x., grains ij; water, ℥ ij. M. Dose, one teaspoonful every two hours. She was entirely relieved of this trouble in two days.

EMACIATION IN PHTHISIS.—Was called to see a lady who had been belching for several hours and was suffering with a great deal of pain at each effort or partial effort at throwing off the gas. She had been eating very heartily, and most anything she wished. Had only one spell of this kind before and that very mild. Her digestion was bad, movements of the bowels were normal as to quantity. Temperature, 202; pulse, 140. I had previously visited this patient and never found her pulse less than 120. I applied my ear over the region of the stomach and could distinctly hear its spasmodic effort to relief itself of, to all appearances, an accumulation of gas. She was quite prostrated and breathing rapidly. I gave her 1 grain of magnesium phosphate 2 x., with 1 teaspoonful water. In ten minutes the patient was very much relieved, and in one-half hour was able to lie down and rest I mixed 1 grain of the magnesium phosphate 2 x., with 2 ounces of water, and ordered 1 teaspoonful every half hour until entirely relieved. So far as this trouble was concerned the patient was well of the complication in a few hours and has had no return of the difficulty.

SPASMODIC COUGH.—This patient had a violent spasmodic cough for three hours; she was a strong, healthy, working woman. The cough had been quite severe from the first; she was completely prostrated when I saw her, and was unable to utter a single word. The cough was constant, spasmodic, until she vomited, then a short breath and she was caughing again; eyes looked red and conjested; face pale; pulse, 130; temperature, 97½; extremities cold; abdomen cold; a cold perspiration; skin looked light and pinched; a vacant stare out of her eyes. This patient had been in good health and was from home visiting, when she began coughing. Had never had such a spell or anything like it before. She informed me the next day that her appetite, digestion, bowels and kidneys were in a normal condition so far as she knew. One hour or one and a half before I saw her she had another physician who injected two portions of

morphine in her arm, giving no relief whatever. I gave her mag. phos. 2. x., grains 1, with teaspoonful of water. The patient was completely relieved in ten or fifteen minutes with no return of the trouble to this day, now several months. After resting one hour, drove home in her buggy.

PEPSIN AS IT IS FOUND IN THE DRUG STORES.

BY J. T. TODD, M. D.

I am not one of those who are ever looking for something to find fault with, and when cause for fault-finding does occur to me, I am very likely, if investigation proves I have just cause for complaint, to be very much disgusted with the thing or the person that gives offense.

Pepsin is one of those things that I have reason to complain of, because I had placed great reliance in its properties to aid digestion when the stomach is weakly in its functions, and more so because the manufacturers have claimed for their pepsin—each—that he prepares a pure article, and with apparent confidence lauds it without stint as a powerful creator of true peptones. I must say that I have not been a little surprised, and even staggered, after reading the various reports of all the facts brought out in the pepsin war in which a few manufacturers of the article are now so earnestly engaged. To state my convictions lightly, I say that I have no hesitation in pronounciug two-thirds of the pepsin sold in the drug stores to be outrageous frauds sandwitched between blandishments and high-sounding praise. Some of these manufacturers trench themselves in the belief that the biggest part of the medical profession is made up of numbskulls and dolts, who cannot, even with the clearest evidence before them, detect a fraud or a lie under the tinsel of lying praise. What can a man be thinking of, who pretends to intelligence, when he says his pepsin is *peptonized* albuminoid! and claims for it the wonderful properties of dissolving 1,000 parts its weight of proteids under favorable circumstances!!

The doctor who is so stupid that he does not know that a peptonized proteid is worthless to act the part of pepsin *per se* is just the timber the pepsin man works upon successfully; but the pepsin man is a great fraud and an ass when he takes for granted that four-sevenths of the medical profession are so beggarly ignorant of physiology. A large number of the various brands of

pepsin on sale in the drug stores come under this head—are deceiptful in claims and false in nature. When a pure pepsin, in good state of preservation, is tested, 1 part will dissolve 1,000 parts of boiled proteid (egg albumen, boiled ox-beef, etc.) in six or eight hours, in water *slightly* acidulated with hydrochloric acid, and at a nearly uniform temperature of 100° F. Now, I know from facts personally demonstrated, that when a man takes the entire stomach of a pig and macerates it in such a solution for several hours at the temperature of the body, he gets, not pure pepsin but a *peptone*, and this peptone has little, if any, power to dissolve proteids. This fact becomes more pointed when the manufacturer adds, besides, egg albumin to the macerated mess. By so doing, he obtains a proportional increase of quantity of peptone and *no* pepsin; therefore such a man and his so-called pepsin are mean, despicable frauds.

These facts give the key to the cause why physicians, everywhere nearly, have become disgusted with pepsin on account of the failure to obtain, from nearly all the various makes, anything but disappointment. Again: I call attention to the fact that nearly all the saccharated pepsin in the drug stores are mere things of "sounding brass." They are likely to be, and too often are, nothing but peptones mixed with some little pepsin and smothered in an ocean of milk sugar, adulterated with starch, etc. Nearly all the high-sounding names given to these so-called pepsins, and which are often claimed to be reinforced with other solvents, as "ptyalin," "pancreatin," "trypsin," etc., are very far from being, in fact, what they claim on paper.

There are a few honest, capable, conscientious manufacturers of pepsin whose preparations are to be trusted, and only but a few. Certain it is that no pepsin is to be trusted that contains over a very small per cent. of peptones; and as the presence of peptones in small quantities in pepsin cannot be well avoided, I make this point, but emphatically say that pepsin made so as to include large quantities of peptones must be frauds. Pepsin is cheapened in price in proportion as its bulk is augmented by peptones. It is, therefore, incumbent on physicians to look sharply into this pepsin business and scrutinize closely the processes of manufacture by the different makers. It must be remembered also that pepsin in its pure state—and this is the only kind that should be used—must be more costly than the fraudulent stuff called by high-sounding names. Pepsin is far from

being an organized ferment, because it spends its energies on its work, that is when it makes a proteid assume the state of peptone, all the power of the pepsin for further work on other proteids is done for, as I understand it; and this is exactly the point that distinguishes the yeast ferment from the pepsin ferment, for the former continually reproduces itself by actual growth and multiplication of its living protoplasm units; on the contrary, pepsin is a dead ferment and has only one degree of action, beyond which it is not possible to go, for it is practically dead after it transforms a proteid into a peptone. If such was not the case, one part of pepsin might turn 1,000,000 parts of proteid into peptone—which is not the case.

The few honest manufacturers must be found out by each doctor for himself. I know what risk one incurs when attempt is made to draw strict lines that reflect. The honest ones are easily found and their preparations will be found to be infinitely cheaper than the worthless preparations of the "cheap johns" of *peptone* stuffs.

I am free to say that the pepsin prepared by the advertiser in this journal is to be trusted when the preparation is not deteriorated by age.

A FEW THINGS I HAVE LEARNED ABOUT DYSENTERY.

BY JOHN F. HARRIS, M.D.

1. That any stereotyped plan is a failure in this as well as everything else, and consequently, all favorite prescriptions on the routine idea of treating the name does not give the best results.

2. That most every epidemic and most every season there is something peculiar about it that calls for the use of certain specific medicines not usually prescribed by medical writers on this disease.

3. That the disease may be aborted in most cases, if taken in time, by giving a laxative, and then bringing the patient under the toxical influence of aconite and gelsemium and afterwards continuing in small doses.

4. That antiseptics form a very important part of the treatment in some cases, given with reference to the special indications calling for each drug.

5. That mer. cor. is about the nearest a specific for the relief of the mucous discharges of anything I have ever given. I give it in the third dec. trit., or about the third dec. dilution, and repeat every hour in 1 or 2 grain doses of the trituration or a corresponding amount of the dilution.

6. That next to the mer. cor., podophyllin in second dec. trit. will best relieve the same condition.

7. That carbo. veg. will generally have a marked effect in controlling the bloody discharges, perhaps, more especially when the blood is of a bright red color; and here I wish to call attention to the fact that I have never been able to get the results from using the crude drug that I have from using the first or second dec. trit. This, perhaps, is too much on the moonshine order for some heroic fellow to try, but those who have learned the fact that the effect of a medicine does not always require a mouthful in the crude state, will soon be convinced if they only give it a sufficient trial. It is not only so in this, but in hemorrhages and hemorrhagic diathesis. I have frequently controlled epistaxis and the hemorrhagic tendency in this and bleeding at the lungs, and also in profuse menstrual disorders, with the first dec. trit. of this inert substance given in 2 grain doses and repeat every two hours and kept up without the use of any other drug.

8. Matricaria and ipecac have special indications which they meet very promptly.

9. Iodide of arsenic meets very promptly a condition that is sometimes met in this disease, and a condition that is also met in muco-interitis, where there is great prostration with continued thirst and only a sup of water satisfies.

10. Corroding discharges, periodicity in the fever: here iodide of arsenic given in 1 or 2 grain doses of the third dec. trit. and repeated every half hour or hour will surprise those who have not tried it.

11. A hyp bath for fifteen minutes with water as warmas can be borne, and the bowels syringed out with water as warm as possible without burning until the patient can retain it and then use a suppository will often give rest and benefit the condition of the patient very markedly.

Other local treatment is often of value as the syringing with hot water as before mentioned and afterwards using a weak solution of permanganate of potash by enema; hamamelis, ʒ j; aconite, gtts. x; tr. opium, ʒ j; in a little starch water used warm and retained with a pledget of cotton sometime gives the patient great relief.

ABSTRACTS.

ERGOT; ITS ACTION IN THE PROCESS OF SUBINVOLUTION, and how it may interfere with this physiological process, when used indiscriminately and improperly, is well set forth in the following, which we take from the *Medical News:*

Dr. M. Putnam Jacobi has called attention to the relations existing between the arterial and venous circulation in the gravid and puerperal uterus. "There is," he says, "a tendency to venous excess in the uterine tissues from the moment of conception to the end of pregnancy"; and we all know that venous hyperæmia is the condition most favorable to growth, and the uterine changes during the entire time are those of simple growth alone.

"When the first pains of labor begin, the venous excess is cut off by the clogging of the sinuses at the placental site with giant cells," and a relatively greater amount of arterial blood fills the uterus. This arterial blood, bearing the oxygen of nutrition, stimulates the large muscle cells into contraction—that is, into the first performance of the function for which the gestative growth has prepared them. These contractions compress the veins and thus further diminish the venous supply. This process ultimately expels the ovum and checks venous hemorrhage from the placental site by venous thrombosis.

After the ovum is expelled, an excess of arterial blood is still required intermittingly, not only to produce the retraction induced by the after-pains, but also to furnish the oxygen necessary to the gradual reduction of the now unnecessary elements into fatty detritus preparatory to absorption. The facility of absorption by veins and lymphatics depends upon the relative difference between the venous and arterial tension.

In order to secure rapid and successful involution, a certain relation must exist between the venous and arterial pressure. An excess of venous blood will check involution and conduce to subinvolution, both by checking fatty degeneration and disabling absorption. On the other hand, excessive rise of arterial pressure, and tonic contraction of the uterus, also interfere with the necessary degenerate changes, by delaying the constructive changes in the endometrium, which, since they are processes o

growth, are best performed under low pressure—venous hyperæmia.

At the placental site, as well as in a less degree throughout the endometrium, after the separation of the placenta and decidua, an important process of repair must be speedily instituted. This is important as prophylaxis against sespsis and subinvolution. It is at this part of the organ that degeneration and growth must go hand-in-hand. By the degeneration of the lacerated membrane and its voidance through the lochial discharge, and by the stimulation of the venous blood to growth, a new endometrium is formed. When the uterus is injected, the veins blue and the arteries red; soon after parturition it is seen that while there is excess of arterial vessels, this excess is less manifest the nearer the endometrium is approached, showing that there is relatively more venous blood in this situation than further out in the muscular walls.

Further corroboration of this condition is found in the fact that the endometrium is entirely reformed much earlier than the complete reduction of the remainder of the organ. In the deeper parts of the uterine walls both degeneration and growth must occur. The new uterus is chiefly formed from the development of the muscular nuclei, while the enormous fibres of the gravid state are reduced to fat and absorbed in the course of involvution, this process being slower than that in the endometrium, as a result of the greater relative excess of the arterial blood. Thus the result of a nice balance, a proper relation between arterial and venous pressure in the process of uterine involution is apparent. It is, therefore, manifest that the disturbance of this essential relation by the stony tetanic contraction maintained by full doses of ergot will defeat proper and speedy involution, will prolong the puerperal period, and will indirectly foster subinvolution.

Again: the tonic contraction of the uterus for an hour and a half after the expulsion of the placenta, is an objection to the employment of a full dose of ergot at this time, in that it confined to the general circulation a considerable quantity of blood which is normally lost in the intervals of relaxation which should occur.

A certain amount of hemorrhage at parturition is conservative. Instead of blood being required for the sustenance of two lives, there is now only one, and that one requires less than before,

because it is no longer required to sustain the laborious functions of the hypertrophied uterus and vagina.

Moderate hemorrhage is likewise conservative in permitting the loss of blood from the uterus, surcharged with the effete products of its recent extreme activity.

He said that it must not be forgotten that he was speaking of the effect of full doses of the drug H. C. Wood, and many others, are authority for the statement that small doses—a few minims of the fluid extract, or a single grain of the solid extract —will only increase the force of the uterine contractions, and not affect the periods of relaxation—in other words, will not disturb rhythm in action. His own experience confirms this view. With small doses, where proper indications exist, he makes no issue.

The following should be the rules governing the administration of the drug:

1. Ergot may properly be administered in small doses, say 10 to 20 drops of Squibb's fluid extract, before delivery, in cases of uterine inertia which resist other means; and especially in women who are predisposed to hemorrhage.

2. It should be administered in full doses hypodermically, or per os, or both, in cases of post-partum hemorrhage

3. When an anæsthetic has been freely used during the second stage of labor, it to some degree predisposes to post-partum hemorrhage. Ergot is, therefore, indicated.

4. It should be administered in small doses, two or three times daily, during the period of puerperal convalescence, whenever a flabby uterus indicates it. In such cases there is no better combination than the pill recommended by Munde: 1 grain extract of ergot, 1 grain of quinine, and ¼ of a grain extract nux vomica.

THE PAGAN OATH.—Dr. A. H. Baird, (in Physio-Medical Journal) says: The following is the oath of the Pagan Age, as translated from the Greek of Hippocrates, and required from all physicians before commencing practice in the art of healing. And it is one which ought to be adopted in the main in this so-called Christian age; and required to be taken by every member of the medical profession of every school, entering upon his or her practice, and then be compelled to live up to it, or be publicly expelled and dishonored.

Were this the case, in our opinion, there would be a better profession, and the people who depend on it to assuage their ills, would enjoy better health and live far longer than now.

The oath reads:

1. "I swear by all the Gods and Goddesses, by Apollo the physician, and Æsculapius and Health, and All Heal, that I will keep this oath and stipulation; to recon him who taught me this art equally dear to me as my parents; to share my substance with him and to relieve his necessities, if required; to look upon his children as my own brothers, and to teach them this art, if they shall wish to learn it, and that by precept, lecture and every other mode of instruction, I will impart a knowledge of the art to my own sons and those of my teachers, and to disciples bound by a stipulation and oath according to the law of medicine, but to none others.

2. "I will follow that practice, which accordieg to my abilty and learning I consider the best for the safety of my patient, and abstain from whatever is deleterious and mischievous.

3. "I will give no deadly medicine to any one, if asked; nor suggest any such counsel; nor will I conspire with a woman to destroy her unborn child; with purity and holiness I will pass my life and practice my art.

4. "Into whatever houses I enter, I will go to them for the benefit of the sick; and will abstain from every voluntary act of mischief and corruption, and further from the seduction of women, whether bond or free.

5. "Whatever, in connection with my professional practice, or not in connection with it, I see or hear in the life of men which ought not to be spoken of abroad, I will not divulge, thinking that all such should be kept secret.

6. "While I continue to keep this oath inviolate, may it be granted to me to enjoy life, and the practice of the art respected by all men in all times; but should I tresspass and violate this oath, may the reverse be my lot."

The above is well worth our time in the close study of it. It shows to us, that on morality and honor, the physician of that age was in no way behind this; and that the treatment of the sick, were quite as humane and reasonable as that by a large majority of the physicians to-day.

Reform and progress in this regard, have been in a circle and a very limited one at that; and the gross darkness which was

then has remained till to-day, and God only knows whether to-morrow will scatter or not, that darkness, by the beautiful sunlight of Physio-Medicalism, for which we hope and pray.

REMOVING FOREIGN BODIES FROM THE EAR.—Jonathan Hutchison, F. R. S. (British Med. Journal) says: "I wish to draw attention to the method of treatment which I long ago advocated, and which is so simple and efficient that it almost supersedes the need of knowledge. It is the use of a silver wire-loop, instead of either forceps or scoop. I have never since I was a student, used either of the latter instruments; and, for the purpose of extracting hard bodies from the ear, I hold that they are most dangerous. With a flexible silver wire-loop, or, if need be, with two placed at right angles, I have repeatedly succeeded when all other means failed. Thus, not only is the loop quite devoid of danger, but is both more easy of use and far more efficient than any other method. It is impossible that it can injure the membrana tympani, or the walls of the canal. The method of procedure is, after having put the patient under an anæsthetic, to introduce the loop gently into the ear, and turn it about until it is believed to have got behind the foreign body. This it will often do at once; but sometimes a little patience is necessary. In one instance, I took out a piece of heavy lead in this way with very little trouble, using two loops at right angles with each other. The simplicity, safety and efficiency of the method make it desirable that it should be better known."

THE DIGESTION OF MILK.—Dr. M. Reichmann, of Germany, draws the following conclusions from a number of elaborate experiments as to the digestibility of milk in the human stomach:

1. Boiled milk leaves the healthy stomach more rapidly than an equal quantity of unboiled milk.

2. The digestion of boiled milk is more rapidly accomplished than that of unboiled milk.

3. The coagulation of unboiled milk in the stomach is complete in five minutes.

4. The coagulation is not caused by the acid of the gastric juice, but by the influence of a special ferment (milk-curdling ferment).

5. The acidity of the gastric juice is at first due almost solely to lactic acid, and, later in the process of digestion, to the presence of hydrochloric acid.

6. Hydrochloric acid first appears in perceptible amount forty-five minutes after the ingestion of half a pint of milk.

7. For the first hour and a quarter after the ingestion of milk the acidity gradually increases, and then decreases until the milk has entirely left the stomach.

8. The curds of casein in digestion of boiled milk are much softer than in the case of uncooked milk.—*Medical Bulletin.*

THE PHYSICIANS OF THE UNITED STATES.—In a recent directory of the physicians of the United States, published by Polk, the total number is given as 85,671, of whom 83,239 are males, and 2,432 females. This makes the ratio of physicians to population about one in 650, allowing for the increase in population since the last United States census. Maryland is the most crowded State, having but 329 people for each physician. Other crowded States are Colorado, 341; Indiana, 306; Oregon, 353. All the remaining States are above 400. New Mexico has relatively fewer physicians than any other State or Teritory, with 1,494 people to each medical man. The remaining States and Territories coming above the one thousand mark are Utah, 1,035; North Carolina, 1,029; South Carolina, 1,084. Ohio has 502, and Kentucky, 541. There are relatively more physicians in Ohio than in either Maine, New Hampshire, Massachusetts, Connecticut, Rhode Island, New York, New Jersey, or Pennsylvania. Taking the table before us as a guide, the "vacancies" exist in New England rather than in ether the Central or Western States. There are relatively more physicians on the Pacific coast than on the Atlantic.—*Medical Record.*

DELIRIUM TREMENS.—Dr. A. Mayes, of Mayesville, S. C., recommends the following: In general practice I prescribe the Jamaica dogwood very largely as a substitute for opiates, and am very seldom disappointed in obtaining excellent results. Now and then I find cases in which it does not produce sleep; but, as the pains are relieved it appears that the hypnotic effect is not as certain as the anodyne effect. Please try the following prescription for delirium tremens, *mania potu.* It has worked wonders in my hands: R. Fl. ext. erythroxylon coca, ʒ vi; fl. ext. celery, ʒiv; fl. extract Jamaica dogwood, (Parke, Davis & Co.'s) ʒ iv; Hoffman's anodyne, q. s. to fill two-ounce bottle. Dose, 2 teaspoonfuls every two hours till sleep is induced;

then 1 teaspoonful every three, four, or five hours till the nervous system returns to a normal condition.—*American Practitioner and News.*

TOILET HAND PASTE.—Sweet almond, blanched, grains 300; bitter almonds, grains 200; rose water, grains 210; powdered borax, grains 30; camphorated oil, spermaceti, each, grains 50; potato starch, grains 200; powdered soapstone, grains 100; cumarin, grain .1; oil of bergamot, grain .1; oil of rose, grain .5; oil of casia, 5 drops; oil of cloves and sassafras, each, 2 drops; oils of ylangylang and orris, each, 1 drop; tinctures of civet and musk, each, 5 drops. The blanched almonds, borax and 10 grains of rose water are beaten together into a uniform mass, add the camphorated oil and spermaceti previously fused together; add the potato starch and soapstone mixed with 200 grams of rose water, incorporate thoroughly until a uniform mass is obtained, then perfume it with the remaining ingredients.—*Western Druggist.*

THE ACTION OF PYRIDINE IN ASTHMA.—Pyridine is, according to the Union Medicale, valuable as an anti-asmatic, whether the affection is of cardiac origin or otherwise. About a drachm of the drug is placed on a plate in a small room, to which the patient pays periodical visits of from twenty to thirty minutes' duration three times a day. After two or three seances the rales in the chest disappear; the expectoration is more free, and sleep is obtained at night, or at all events relief from the asthmatic attacks. In some cases the improvement is permanent, in others it lasts unimpaired for five or six days. Iodine treatment is then required, which is usually efficacious, but which cannot be borne by all patients.—*Medcal Age.*

NAPHTHALINE IN URINARY DISEASES.—Naphthaline, which has been used to disinfect the stools, has also the property of retarding the putrefaction of the urine, and may therefore be administered for cases of urinary disorder in which the urine has a fœtid odor. Daily doses of one gramme and a half of naphthaline in cases of pyelo-nephritis, cystitis, chronic prostatitis, and stricture with fistulæ, have rendered the urine sweet in from two to five days. The urine, from being turbid, purulent, and alkaline, becomes neutral or acid, and the quantity

of pus is diminished. No disorder has been noted in the digestive processes. The drug does not augment the frequency of micturition.—*London Lancet.*

IODOFORM IN NEURALGIA.—A mixture of 1 part of iodoform to 10 or 15 of collodion, if spread repeatedly upon a neuralgic surface until it attains a thickness of one or two millimeters, is said by a writer in the Neurological Review to be quite effective in the treatment of certain neuralgias. If the first application does not speedily terminate the neuralgia, those who have used this mode of treatment direct that its application should be continued. It seems especially valuable in the relief of neuralgias of the trigeminus. It also seems of vulue to be applied along the spine, particularly at painful points in what is called spinal irritation.—*Weekly Medical Review.*

HAMAMELIS IN PUSTULAR ECZEMA OF INFANTS, in doses of ½ drop to 5 drops, in syrup or milk every two hours of the fl. ext., in many cases, will cause all constitutional excitement to abate, the serus or sero-purulent discharge to lessen, and the inflamed and swollen condition of the tissues to decline. It will, if persisted in, very often thus bring to the little sufferer the greatest relief from the high vascular excitement and the intolerable itching. Hamamelis is also a valuable remedy locally in eczema, either in the form of tincture or in that of diluted fluid extract. Thus used it has an astringent and a sedative action on the tissues.—Dr. John V. Shoemaker in *Medical World.*

WHEN TO TIE THE UMBILICAL CORD.—The following statistics are worthy of note. Engeli figures, out of 90 cases of premature birth in which the cord was tied immediately and before pulsations ceased, 18.88 per cent. died during the first ten days; while out of 74 similar cases in which the cord was ligated late, only 9.45 per cent. died. Syphilitic fœtuses and those weighing more than 6.5 pound are excluded from the statistics.

When the cord is tied before the umbilical artery ceases to beat several ounces of blood are taken out of the infant's body and the blood corpuscles are much reduced in number.

PARALDEHYDE as an antidote to strychnine is set forth by Prof. Bokai in doses of 1½ to 2 drachms.

WHAT IS THE MEANING OF CANDLE-POWER?—The measuring of the candle-power of a light is accomplished by comparing the shadow cast by a rod in the light of a standard candle with the shadow cast by the light tested. By moving the latter toward or away from the rod a point will be reached at which the shadow cast by both lights will be of the intensity. The intensity of the two lights is directly proportional to the squares of their distances from the shadows, that is, suppose the light to be tested is three times the distance of the candle, its illuminating power is three times as great.—*American Analyst.*

CAMPHOR CREAM prepared as follows is said to be a very fine preparation: Dissolve 1½ ounces white castile soap in 3 pints of water, and 2 ounces carbonate of ammonia in 2 pints of water, and then mix the solutions. To the mixture add 2 ozs. gum camphor, which has been rubbed with alcohol to a thin paste, and shake briskly. Add spirits of turpentine gradually until the mixture is brought to the consistency of a cream. Finally add 1 ounce each of tinct. opium and oil origanum.—*American Pharmacist.*

OLD CHAMOIS SKINS may be softened and cleaned by the following process: Rub plenty of castile soap into the skin, and soak for two hours in a weak solution of sal soda, in warm water, then rub it well until quite clean. Afterwards rinse in a weak solution of sal soda and soap, in water; after rinsing, wring it dry in a coarse towel, and when fully dry, beat it until soft and smooth, and it will be finer and better than most new chamois skins.—*American Pharmacist.*

RECENTLY we saw a case of persistent hemorrhage from the nose and lungs during a severe attack of typhoid fever. The belly was tympanitic and the skin a dirty hue; the age of the patient was eighteen years. We gave podophyllin, 1-30 every hour, ten times; then every fourth hour two days. The hemorrhage eased up in six hours and ceased entirely in twelve. Then a rapid convalescence was entered upon.

IRON ALUM is a good antiseptic and styptic in surgical cases. A deep bleeding wound may be filled with the powder with the result of stopping the hemorrhage. It is a good dressing for all wounds.

PERMANGANATE OF POTASSIUM IN BURNS AND FROST-BITES.—Zubuloff (Meditzinsko Obozrenie, London Medical Record) reports forty-four cases of burns and thirteen of frost-bite which were treated with local applications of a solution of the permanganate containing 1 or 2 grains to the ounce of water. He finds the solution most useful in the treatment of frost-bite; it relieves pain, allays inflammation, and prevents suppuration in blisters. In burns of the second degree a half-grain solution is preferable. *Indiana Eclectic Med. Journal.*

COATING IRON WITH ALUMINUM.—The interesting German process of coating iron with aluminum is said to be having a large introduction—a Bunsen burner with a blast or muffle being employed for the operation. It is found possible by this means to manufacture various articles of the durable metal for daily use, the coating of aluminum giving them a silver-white lustre. The metal does not oxidise under normal conditions, stands ordinary heat and takes a high polish.—*Analyst.*

PODOPHYLLIN in doses of 1-30 grain is a powerful medicament for good in all cases of disease that may justly be traced either directly or secondarily to engorgement of entire portal system. This is a frequent state in strumous children, in chronic malarial disorders, in the sequel to cholera infantum and infantile remittents. Podophyllin is the remedy. It is given in too large dose; even 1-30 grain may be too big, and the dose might better be 1-50 grain, well triturated with soda bi-carb. 2 grains, and repeated every two hours.

SULPHUROUS ACID IN TYPHOID, in doses of 3 to 20 drops, according to age, every four hours, is said to destroy the septic material on which the essential nature of the fever depends. This being accomplished, convalescence naturally commences; but the treatment should be continued in reduced doses a week longer. Sulphurous acid is a potent germ killer outside the body, but does it enter the organism in this form is a proper question.

A POWERFUL DRUG.—A solution of strophanthin, 1 part to 10,000 of water, brought in contact with a frog's heart, will stop it in twenty minutes.—*Medical Age.*

HAMAMELIS is a valuable remedy in inflammatory diseases of the skin. In diseases of the mucous membranes resulting from venous hyperæmia, in folicular catarrh of these membranes, especially of the duodenum. Dr. H. C. Wood claims that it has no other merit save that afforded by the tannin it contains. This is, however, an error. Eclectics have for many years used this medicament and know by experience that it has therapeutic properties of the highest order. In piles, it goes without saying, hamamelis is specific, nearly. In the feeble digestion resulting after a severe (especially in scrofulous children) and prolonged attack of cholera infantum, hamamelis is curative because it strengthens the nutritive functions of the intestines. In bleeding from the lungs, bowels, stomach, kidneys, bladder, etc., hamamelis is a powerful medicament. Even in profuse menstruation it is of signal service. The old Eclectics combined it with capsicum and the best results followed the prescription. Hamamelis and hydrastis combined will be found a serviceable prescription in folicular catarrh of the stomach and duodenum. There is reason for believing this latter combination promotes the assimilation of fat from the duodenum through some influence it exercises on the villi.

CAPSICUM has for its especial physiological action a controlling or rather stimulant influence on the vaso-motor centre and on the motor mechanism of the heart. It is a pure stimulant to the vascular system and to the cardiac ganglia, through which the force and energy of the systole is increased, at the same time the tension of the vaso-motor elements is heightened; hence the pulse becomes stronger and blood pressure increased, as the result of the above two factors. Therefore we find under capsicum the capillary circulation active and the sympathetic functions energized.

COCAINE in violent spasms, etc. of the urethra, ¾ of a gr., dissolved in oil and injected into the urethra, afford relief. Prof. Delbridge recommends injecting a solution of cocaine, ½ grain, in water, ʒ i, in cases of irritable bladder and painful micturition in women during the latter months of pregnancy.

Dr. Alexander Westbrook says he arrests pain and spasm of the urethra in gonorrhœa by injecting ¼ grain of cocaine muriate, dissolved in water, into the urethra.

FŒTID FEET is said to depend for its odor on a certain kind of bacillus which lives and grows in the interstices of the skin—which adheres to the stocking and also multiplies in the sweat of the feet. The remedy is found in using germicides as salicylic acid, boric acid, corrosive sublimate, etc. The feet are well soaked in either of these solutions and scrubbed with a soft brush so as to get the germicide into the cracks and crevices of the skin down to the fungus to insure its dislocation. At the same time the stockings are soaked in a fairly strong solution of the germicide and dried without being previously wrung free of all the fluid. The stockings thus treated are changed two or three times a day and in severe cases the feet are also treated, as above described, two or three times a day. This procedure is said to completely destroy the fungus, after a period of varying length in different persons, and a final cure effected.

A SPEEDY REMEDY FOR HEMORRHAGE.—Dr. Vanndie Walker, in the Indiana Medical Journal, gives the following formula for the speedy arrest of hemorrhage from the lungs or other organs: ℞. Oil of erigeron canaden, ʒ j; oil cinnamon, (pure) ʒ ss; fl. ext. ergot, (pure) ʒ iss; syrup acacia, (heavy) q. s. to make ʒ viii. M. Sig.—Give a teaspoonful every half hour till hemorrhage ceases, then continue a dose every six hours till the patient is well.

BI-SULPHIDE OF CARBON in the treatment of pulmonary affections is worth looking to. It arrests purulency of the bronchi, abolishes offensive odors eminating from the bronchi and cavities in the lungs, and soothes the mucous membrane and the lung nerves also. The following formula may be tried: ℞. Carbon bisulphide, ʒ ij; essence of mint, gtts. x; aquæ, ʒ iv. Dose, ʒ ss several times a day.

CLEMENT'S BROMIDE OF ARSENIC SOLUTION is a good medicament in the treatment of diabetes mellitis. It may be extemporised by cautiously adding bromine drop by drop to Fowler's solution of arsenic. The solution will be clear. Dose, 5 to 10 drops after meals, same as Fowler's solution.

COTOIN, the active principle of coto, is used successfully in rebellious diarrhœa in doses of 3 to 4 grains as many times a day.

LACTIC ACID locally in tubercular ulcerations of the larynx, vocal cords, etc., has been used with gratifying results by Dr. Theodore Henry, of Warsaw. It is applied in solution of various strength 20 to 30 per cent. up to 80 per cent. to the ulcers, first benumbing the parts with a 4 per cent. solution of cocaine, then applying the acid carefully. This is worth noting.

LACTO-PHOSPHATE OF LIME in strumous affections of children in whom the mucous membranes are edematous, the alvine evacuations slimy, the stomach catarrhal, and the blood passing in the fæces. Give these children 2 grains three or four times a day, but the preparation must be of recent make or it fails to do any good.

MANACA is a good medicament in chronic muscular rheumatism. It is also recommended by Dr. J. Berger in chronic articular rheumatism, who claims for it great success. In the muscular variety, chronic myalgia, we know it is good by experience.

PAINLESS PARTURITION.—COCAINE.—By painting a 4 per cent. solution on the os and cervix uteri, the vaginal cul-de-sac, the vulva and vaginal walls, Doleris and Dubois were able to afford nearly complete relief and freedom from pain to parturiating women.

FOR INGROWING TOE-NAIL paint the sore part with a saturated solution of tannin in water; repeat a few times; The effect will be to dry up the granulating surface, contract the blood vessels and cure the case.

STRYCHNINE hypodermically in malarial hæmaturia, is recommended by Prof. I. H. Hand. We have frequently called attention in the JOURNAL to strychnine, subcutaneously, in the treatment of this disease.

WHEN Eclectic Physicians, many years ago, became convinced of the superiority of Specific Medicines, other sects opposed both the remedies and the manufacturers of them. Now that it is demonstrated beyond dispute that these remedies are the standard representatives of the most important plants, we should not for-

get to give due credit to the manufacturers who persisted in working for their perfection. The continued endeavors of LLOYD BROTHERS, of Cincinnati, has been crowned by success, and they deserve our encomiums. If they had been content to push cheap, profitable drugs, they would, perhaps, have made more money, but could not have attained the high reputation that they now enjoy.

REMARKS ON THE USE OF PAPINE.

BY WM. J. CRITTENDEN, M. D., OF UNIONVILLE, VA:

In the practice of medicine we are often called upon to treat patients who possess a peculiar idiosyncracy as to the effects of opium or any of its preparations.

During January, 1886, I was called to see a lady suffering with acute peritonitis. She assured me that she could not use opium, as she had tried previously; but I gave her one-eighth grain of morphia sulphate and one-hundred-and-twentieth grain of atropia sulphate hypodermically, and in a few minutes the depressing effects was noted, both upon the respiration and circulation; the pupils also became visibly contracted. I then tried the various usual substitutes for morphia in succession, but to no effect. I determined to try Papine; but not being able to give it by the mouth on account of nausea, and as she objected to the use of the hypodermic needle, I gave her two drachms per rectum, and repeated it in one hour. The result was that she sank into a quiet, peaceful sleep, which lasted for several hours. During the remainder of her sickness I gave her Papine with the most gratifying results. As soon as her stomach would retain it I gave it to her by the mouth in one-drachm doses.

I have also used Papine in a case of uterine cancer, in lieu of morphia. In cases which patients have been taking morphia until it has lost its anodyne influence, Papine is well adapted.

Some time ago (in the absence of the family physician) I was called to see a lady, one night, in great haste, who was suffering with malignant disease of the uterus. On my arrival the nurse informed me that she had given her a grain of morphia, with suitable per centage of atropia, every hour for five or six hours, and during the intervals she had given her chloroform, but to no effect whatever. Accordingly, I gave her 30 min. of Papine with eighth grain morphia sulphate, repeating in fifteen minutes, and in a short time she fell asleep and slept six hours, which was more than she had slept at a time for months.

In pneumonitis, pleuritis, and bronchitis I have found Papine to answer an excellent purpose. In dysentery it is useful both as an anodyne and in relieving the tenesmus. In the diarrhœa of children I frequently combine with it bismuth subnitrate and prepared chalk. I have used it also in cystitis. In neuralgia, when I wish an anodyne, I use Papine. As an anodyne, it is equal if not superior to morphia; and I have never yet seen any unpleasant effects from its use. As a hypnotic I find it to be an agent of great value.

It is inferior to bromida when we simply wish the effect of a hypnotic; but it fulfills the indications when we wish a decided anodyne as well as a hypnotic influence.

I trust that the readers of the Virginia Medical Monthly may give this drug a trial, as I feel that they will be amply repaid for their trouble.— *Virginia Medical Monthly.*

DELEGATES TO THE INTERNATIONAL MEDICAL CONGRESS.

At the National Eclectic Medical Association, which met in Atlanta, Ga., June 16th, 17th and 18ht last, a committee was appointed to suggest individuals to represent this body at the International. The following report was made and unanimously adopted:

ATLANTA, June 17, 1886.

To the National Eclectic Medical Association:

We, your committee, appointed to select twenty-five delegates and alternates to represent this Association in the International Medical Congress at its session in Washington, D. C., 1887, would respectfully report the following named members:

DELEGATES.

1. Edwin Younkin.....Missouri
2. A. Jackson Howe.....Ohio
3. Anson L. Clark.....Illinois
4. S. B. Munn.....Connecticut
5. Alexander Wilder.....New Jersey
6. L. T. Beam.....Pennsylvania
7. John King.....Ohio
8. L. E. Russell.....Ohio
9. Henry B. Piper.....Pennsylvania
10. Milbrey Green.....Massachusetts
11. J. A. McKlveen.....Iowa

12. I. J. M. Goss.....Georgia
13. R. J. Thornton.....Alabama
14. A. C. Sherwood.....California
15. Wilson H. Davis.....Illinois
17. Albert Merrell.....Missouri
18. John M. Scudder.....Ohio
19. T. J. Batchelder.....Maine
20. G. Hermann Merkel.....Massachusetts
21. J. R. Duncan.....Indiana
22. Richard E. Kunze.....New York
23. George Covert.....Wisconsin
24. Charles Band.....Nebraska
25. H. S. McMaster.....Michigan

ALTERNATES.

1. J. H. Tilden.....Kansas
2. J. A. Jeancon.....Kentucky
3. R. E. Bennett.....Illlnois
4. W. F. Linquist.....Connecticut
5. G. W. Boskowitz.....New York
6. B. L. Yeagley.....Pennsylvania
7. J. F. Lock.....Kentucky
8. J. C. Butcher.....Ohio
9. Henry Yeagley.....Pennsylvania
10. Robert A. Reid.....Massachusetts
11. E. D. Wiley.....Iowa
12. William M. Durham.....Georgia
13. J. W. R. Willson.....Alabama
14. Noah Simmons.....Kansas
15. John C. Stout.....California
16. J. G. Bemis.....Illinois
17. George C. Pitzer.....Missouri
18. John V. Lewis.....Ohio
19. N. R. Martin.....Maine
20. R. W. Geddes.....Massachusetts
21. W. F. Curryer.....Indiana
22. Byron W. Pease.....Connecticut
23. S. S. Judd.....Wisconsin
24. C. Edwin Miles.....Massachusetts
25. V. S. Baker.....Michigan

Respectfully submitted.

E. YOUNKIN,
L. E. RUSSELL,
L. T. BEAM,
WILSON H. DAVIS,
S. B. MUNN,
Committee.

It is earnestly suggested that both the delegates and alternates be in Washington at this meeting, and that they go there in the interest of American Medicine and Surgery. There may be some attempts at hedging by a few American cliques, divided by paper walls, but all Europe bids us come, and the spirit of progressive medicine in America says, Come, and—we are going!—*American Medical Journal.*

EDITORIAL

THE WOMEN'S DEPARTMENT OF THE GEORGIA COLLEGE OF ECLECTIC MEDICINE AND SURGERY, EXCLUSIVELY.

The Trustees of the Georgia College of Eclectic Medicine and Surgery have consulted eminent legal authority to ascertain what rights they have under the charter of this College to establish the Women's Department (exclusively). The best lawyers tell the Trustees they have this power, and what they do under the charter in this direction is legal through and through.

Accordingly, the Trustees have unanimously resolved to establish, and have established, the Women's Department of the Georgia College of Eclectic Medicine and Surgery on the same basis, with the same curriculum, and under the same rules and regulations as appertain to the male department. The Faculty is appointed to fill all the chairs, and the Course will commence on Monday, the 14th day of March, 1887, and continue five months. Arrangements have been made for prosecuting practical anatomical studies in the dissecting room, as usual. The Course will be as thorough, practical and comprehensive in this department as in the regular Winter Course. The object in establishing the Women's Department is to afford women, who wish to study medicine in an Eclectic Medical College, an Institution *exclusively* devoted to their medical education.

The Trustees are confident this move will receive the support of the friends of liberal medicine everywhere, and especially of women who desire to prepare and fit themselves for the high calling of physicians.

The fees are the same as in the male department.

For further particulars, address JOS. ADOLPHUS, M. D., 45 Butler street, Atlanta, Ga., who will take pleasure in answering all inquiries.

Owing to the near approach of the time for the first Course to commence no announcement further than this will be issued for the first Course. During early Summer the announcement for the session of 1887 and 1888 will be issued—probably in June next; so you will please write for a copy. And the friends of this advanced move will, no doubt, esteem it a pleasure to send us the names and address of ladies who contemplate studying medicine, that we may send to them the annual announcement of the Woman's Department of the Georgia College of Eclectic Medicine and Surgery.

SULPHATE OF MAGNESIA

Is a valuable medicament in albuminuria. Under its administration the albuminuria diminishes considerably from day to day. This result is very striking in some cases; in others not so much so; a peculiarity that attends all other medicaments, because we have no specifics in medicine.

This medicament is also said to cure warts on the hands, face and other parts of the body, when administered in small doses, such as 2 to 5 or 10 grains, two or three times a day, in water.

In some epidemics of dysentery we have known 60 grains of this medicament prove a veritable specific, administered in hot herb teas, and repeated every hour or two until the character of the evacuations are changed from bloody and muco-prurient to a watery bilious nature.

Ten grains of sulphate of magnesia, 3 grains of quinine, and ¼ grain of sulphate of iron, all dissolved in 2 ounces of water, and repeated four times a day, cured a case of albuminuria over which no other remedies, single or combined, had the least beneficial effect upon. This same combination cured a case of pernicious anæmia that resisted other well selected and applied treatment.

We are of opinion that this medicament is a stimulant to the blood-making glands. As a purgative we have no use for it.

A solution of it makes a good application to inflamed parts. Two years ago we cured a case of violent constipation, that had bid defiance to other remedies, with the following: Sulphate of magnesia, grains 5; quinine sulphate, 2 grains; dilute sulphur, ℥

acid, gtts. 2 ; water, 4 ounces—to be taken at one dose, and repeated three times a day. The constipation was broken in a week, but not by liquid or soft stools, and the altered evacuations slowly became regular daily until the patient could leave off the medicine. One dose a day was given for two weeks, then entirely suspended.

In small doses of 5 grains it is a vaso motor stimulant, stopping chronic hemorrhages.

We have seen it successfully used in chronic menorrhagia, in these doses repeated several times a day.

PROTEIDS OF VEGETABLE ORIGIN.

The old reformers insisted that these proteids differed in their physiological properties and activities, when taken as food, very materially from the animal world. The former, they contended, are less irritating and more readily converted into tissue—i. e. assimilated by the animal organism—than the latter ; that the economy is not worn out in the act of assimilating vegetable proteids as it is in assimilating animal proteids. It was claimed that wheat is the nearest approach to a normal food known, not excepting milk, and that these two foods bear a very close analogy both as to their relative proportions of proteids, hydrocarbons, fats and salts; whereas the proteids of animal origin bear a very disproportional relation in these principles, the nitrogen being greatly in excess, while the hydrogen, carbon and oxygen are in considerably deficient quantities; consequently animal proteids are not force producing foods, but rather destructive in their nature to the organism.

Regard must be paid to the fact, well established, that chemically and in other physical attributes the two forms of proteids differ strikingly. It was assumed by those reformers that vegetable food is more congenial to the wellbeing of the organism when it is in an unbalanced condition (the sick man), and seeing how easily some organs and tissues are over-excited by animal proteids, these foods are objectionable in such states. Chronic diseases are far easier and more satisfactorily treated when the patient is under the influence of vegetable foods. In point of fact, more skill and adaptation is required in the selection of a well directed vegetable dietary, exclusively, than when animal food enters into the dietary.

LOVE AND PHILOSOPHY.

BY J. W. HENDERSON.

'T was at the Concord Sages' school
We met one Summer's day;
I guessed and used no logic rule—
I guessed what she would say:
"'T is very warm"—this with a sigh—
"The sun that shines from Thence,"
She said, and pointing to the sky,
"Is rolling toward the Whence."

I told her that it must be so,
At least, it seemed so there;
For there was much I did not know
Of the Whatness of the Where.
About the only thing I knew
When she was standing near,
Was that the sky was much more blue
In the Nowness of the Here.

She smiled and said, "perhaps 't was well
Those pretty themes to touch,"
And asked me if the rule I 'd tell
Of the Smallness of the Much?
I told her that I did not know
That rule; but, then, I knew
A rule that just as well would go—
The Oneness of the Two!

She blushed, and looked down on the ground,
And said, "It can 't be so";
And then the whole earth turned round,
For my heart was full of woe.
"Unto the Ceaseness of my End,"
I said, "I now shall go";
She murmured, "Do n't you comprehend
The Yesness of my 'No?'"

SEND to H. M. Merrell & Co., Cincinnati, Ohio, for a copy of their dose book. You will find much in it that is interesting and worth knowing.

DEATH OF ROBERT W. GEDDIS, M. D

On the night of December 5, 1886, died in Winchendon, Mass., a distinguished Eclectic physician, as we learn, from angina pectoris. This attack was sudden and of short duration; in an hour the good man died. The deceased was of Scotch birth, and came to the United States in 1841. The greater part of his professional life was spent in Winchendon.

Dr. Geddis was an earnest, faithful and uncompromising medical reformer, a man of talent, energy, and positive principles which he never bartered, traded or compromised. To him Eclecticism meant more than a name. He was loyal to the principles that underlike it, and maintained them under the banner of the name, nor was he slow to defend what he believed true even in the face of enemies and opponents. The weakness of New England Eclectics is their want of manly courage to stand up for the truth and the right as they believe it. There are several notable exceptions among them and Dr. Geddis was one of the distinguished few. It is, therefore, a calamity to us, as a school of physicians, when such useful, able men as he are stricken down in the midst of their usefulness. Dr. Geddis was a distinguished physician—a man of talent, and successful. His friends loved him for his manliness and sincerity; his confreres respected him for his wisdom, and the liberal profession, in common with all who knew him, sincerely mourn his loss.

SALICYLATE OF LITHIUM is well regarded in chronic articular rheumatism as giving better results than the sodium salt. The daily dose is 60 to 70 grains in divided parts, and kept up until the desired effect is obtained.

In chronic cystitis of a rheumatic or gouty origin, the medicament has proven highly valuable. In progressive sub-acute rheumatism the best results have followed its use; and the pains that linger in the joints after acute attacks have subsided are well treated with the medicament. Some cases of rheumatic neuralgia of any part yield finely to 5 to 6-grain doses of this medicament, repeated every two hours—there may be as high as 10 grs. to start with in very severe cases of this form of neuralgia. There is a form of rheumatic neuralgia that attack old people who have sustained fracture of one or more bones, and the pains may come on months or years after the injury and be located in the limb—worse at night. The knuckles or wrist may swell or the great

toe; sometimes the knees become puffy, yet not painful. The suffering is most intense at night, and the urine loaded with lithates. The many such cases do well on the salicylate of lithium in 2 grain doses largely diluted in some spice or aromatic tea.

GEORGIA ECLECTIC MEDICAL ASSOCIATION.

To the Members of the Association, and to all the Friends, Abettors and Promotors of Liberal Medicine:

You are hereby notified and enjoined to attend the coming meeting of said Association which will be held in the large lecture hall of the Georgia College of Eclectic Medicine and Surgery, 48 Butler street, Atlanta, Ga., on Tuesday, March 1, 1887, commencing at 10 o'clock in the morning.

This invitation is fraternally extended to all liberal physicians irrespective of schools.

Business of special and absorbing interest to all liberal physicians will be brought up for discussion and disposal. Many prominent liberal physicians will be in attendance.

The Commencement exercises of the Georgia College of Eclectic Medicine and Surgery will be held on Wednesday evening, March 2, at DeGive's Opera House, in the city of Atlanta, and will be under the auspices of the State Association.

R. M. AUTEN, M. D., President.

WM. M. DURHAM, M. D., Secretary.

TO TENNESSEE ECLECTIC PHYSICIANS.

DEAR BRETHREN: You will please note, and act in accordance. The next meeting of the Tennessee Eclectic Medical Association will be held in the city of Nashville, at the Commercial Hotel, on the 8th and 9th days of February, 1887. You are all equally interested in the principles and organization of liberal medicine, and have an equal share in its glories and achievements. Please make it your special business to attend the meeting and aid in the forward movement of the good cause you so deeply love and cherish.

EDITOR G. E. M. JOURNAL.

THE COUGH OF PNEUMONIA AND PHTHISIS is well treated wi t tincture of collinsonia in infusion of asclepias tuberosa. Five drops in two or three fluid ounces of the infusion, repeated as frequent as the cough is severe and annoying. The harassing cough of pneumonia can be well controlled in this way, for both

these medicaments are anæsthetic to the pneumogastric and its laryngeal branches. The Allopaths slay thousands yearly with opium and morphia, in vain endeavors to benefit their phthisical and pneumonic patients with this slaughtering drug, which in Allopathic hands is more of a destroyer than a savior. We have repeatedly seen the cough and bronchitis, that so cruelly harrass and exhaust consumptive patients, nicely quieted, and needed rest obtained, under the influence of these excellent medicaments.

TREATMENT OF CHRONIC LARYNGITIS.—We have treated a number of cases of chronic laryngitis successfully with the following: ℞. Potassium bichromate, grains 3; water, 4 fluid ounces. M. Sig. Tablespoonful three times a day. Alternate with: ℞. Tincture collinsonia, tincture stillingia, aa ℥ ss. M. Sig. Twenty drops in water, to be taken an hour or two after the bichromate each time. Two cases were of considerable severity, having resisted all other treatment; but, then, these cases were at first under Allopathic treatment for several years, to their detriment.

An Epitome of the newer materia medica, standard medical products, and fine phamaceutical specialties, introduced and manufactured by Parke, Davis & Co, to which is added a complete property and dose list of all the fluid, solid and powdered extracts, German tinctures, normal liquids and concentrations prepared by them, together with a complete formula list of their sugar and gelatine coated pills, designed for the special convenience of the busy physician. Fourth edition, revised and enlarged, 1886.

This is a well prepared book of 76 pages, containing a large fund of valuable therapeutic and practical information. Write to the publishers for a copy, which will be sent you free of charge if you mention this journal.

COLLINSONIA IN IRRITABLE HEART is not to be forgotten, in doses of 2 to 3 drops in water, repeated several times a day. The heart is relieved of the abnormal excitement it frequently takes on as a reflex symptom, which is a result of disturbance in other ganglianic distributions, especially of the splanchnic. Some Eclectic authorities claim that the *whole* plant—leaves, stems and root—should be made up into tincture, from which better results will, as is claimed, be obtained. The heart becomes irritable.

in some conditions of the assimilating system whereby poor blood is sent to nourish the organ. Even after the assimilative functions are bettered by other appropriate treatment, the irritable heart remains, a kind of hyperæsthesia of the heart ganglia lingering. In these cases collinsonia does remarkably good service in soothing the gangliodic elements of the organ.

BOOK NOTICES.

Potter's Materia Medica, Pharmacy and Therapeutics embraces in a single volume of 800 pages, the essentials of practical Materia Medica and Therapeutics. Although it is concise in its details, yet it is complete. Pharmacy is presented also in a concise and practical manner. The book should take rank as one of the best for reference for the physician and guide for the student. There is much in its pages of original matter derived from the author's own experience. The print and binding are excellent. Published by P. Blakiston, Son & Co., 1012 Walnut street, Philadelphia, Pa. I. J. M. Goss, A. M., M. D., Marietta, Ga.

Eighth Annual Report of the State Board of Health of Illinois, with an appendix embracing report on disinfection and disinfectants; Coast defences against Asiatic Cholera; report of proceedings Sanitary Council of the Mississippi Valley; Meteorological tables; State Sanitary System and House inspection; Vital statistics of Illinois, and coronor's inquests; Medical Education in the United States and Canada, 1765–1886. This report contains a large mass of interesting information on all topics treated. We return Dr. John H. Rauch, the able secretary of the Board, our thanks for the courtesy extended to us.

Vick's Monthly Magazine and Floral Guide for January, 1887, is at hand. Vick is the household word in the United States in the line of beautiful flowers and reliable seeds. He is a liberal and square dealer. By the-way, we remind our readers that Vick's Monthly Magazine should be in every household in the South. Every number contains a finely executed parti-colored picture of some beautiful flower, beautiful enough to be framed as an ornament, and the reading is interesting and instructive. We will club it with the JOURNAL for 75 cents per annum extra, the publisher's price being $1. Send for a specimen copy, to James Vick, Rochester, N. Y., and say you are directed to do so by the editor of this journal.

The Journal of Dietetics; published quarterly; devoted to investigations into the physiology and pathology of digestion and nutrition, and the relations of regimen to practical medicine; subscription 50 cents per annum; published by J. B. Savage, Cleveland, Ohio. The first number of this journal is before us. We must say it is richly deserving of extensive patronage, judging from the present number. Send 15 cents for a sample copy.

THE
ECLECTIC MEDICAL JOURNAL.

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ORIGINAL COMMUNICATIONS.

A SYLLABUS OF PHYSIOLOGY.

DESIGNED AS A BRIEF REVIEW OF THE SALIENT POINTS OF HUMAN PHYSIOLOGY.

BY JOSEPH ADOLPHUS, M. D.

[CONTINUED FROM P. 409.]

15. *The fibrin factors* are—(*a*) *Paraglobulin* also called fibrinoplastin, which exists in a fluid state in the blood in the proportion 22 parts per thousand; (*b*) *Fibrinoplastin*, which exists in the fluid state in the blood in the proportion of 3 parts per thousand; (*c*) *Fibrin Ferment*, a substance derived from macerating blood serum in strong alcohol for several weeks; (*d*) a certain minimum quantity (usually a mere trace) of some mineral neutral salt e. g. Na Cl. All these must be present to ensure the formation of a clot.

(*e*) Fibrin then is developed in dead blood by the interaction of *a* and *b* chemically and physically in the presence of *c*, which latter takes no part in the process save only through catalysis, as it does not enter as one of the constituents of fibrin; the presence of *d* is equally essential as no clot will form when the requisite quantity of mineral neutral salt is absent.

(*f*) The quantity of fibrin formed hardly exceeds the quantity of fibrinogen present in the plasma.

(*g*) When blood coagulates all its fibrinogen is used up in the formation of fibrin, a large excess of fibrinoplastin is left over in the serum.

(*h*) Blood serum will not coagulate spontaneously.

(*i*) The fluids found in the serous sacs of the body *a. e.* in the pericardium, pleura, peritoneum, also the fluid of hydrocele, and ascites, are not prone to coagulate spontaneously.

Now, it is known that when blood serum which contains a large quantity of fibrinoplastin but no fibrinogen, is added to any of the fluids mentioned in *i.* and which contain fibrinogen but no fibrinoplastin, then a clot will be formed.

(*j*) Fibrinogen and fibrinoplastin can be separately obtained from blood plasma. The former also from lymph and chyle as well as from *i.* Fibrinogen is best prepared from hydrocele fluid by diluting with ten or fifteen times its volume of water and passing a stream of CO_2 through it when a sticky, glutinous precipitate will be obtained in small quantity. Fibrinoplastin may be obtained from blood serum by diluting it with twelve times its bulk of ice-cold water; to every 120 *c. c.* of this add 4 or 5 drops of a 25 per cent. solution of acetic acid, then pass a stream of CO_2 through the diluted serum. The fibrinoplastin will be precipitated as a fine white powder, copious and granular. (No. 14 *a*).

(*k*) The *fibrin ferment* is obtained by macerating blood serum in 20 times its volume of strong alcohol for a month; certain changes are produced in the proteids of the serum whereby they are made insoluble in water at the same time the ferment becomes soluble. The alcohol is filtered off, the residue left on the filter is carefully dried, powdered and triturated with water and filtered; the filtrate contains the ferment in solution while the insoluble proteids are left behind.

(*l*) *Artificial Clot.*—If fibrinogen and fibrinoplastin are separately dissolved in water and the two solutions mixed no coagulation will take place if the ferment be absent; on adding this, coagulation at once takes place provided a certain small per cent. of Na Cl be present; however, if this latter is wanting, no coagulation occurs.

(*m*) Fibrinogen and fibrinoplastin can be prepared so perfectly free of ferment and mineral salt that the first two will not produce a clot until the second two are added, and in the absence of either of these latter no clot will form.

(*n*) The quantity of ferment is immaterial so far as the volume of clot is concerned, as its action is purely catalytic, and when blood coagulates the ferment is carried down with the fibrinoplastin. On the other hand the volume of the clot is nearly if not wholly owing to the quantity of the fibrinogen, and it is claimed that this latter and the ferment are alone concerned in the formation of the clot. Putting these facts together we are

led to conclude that the fibrin ferment is a post mortem formation and not normal to the living blood even if we admit fibrinogen and fibrinoplastin are normal constituents of living blood.

16. *The sources of the fibrin factors* (fibrinogen and fibrinoplastin) are the breaking up of the white corpuscles, a retrogressive solution, dissolved in the plasma, which is removed by the activity of the destroying and eleminating organs (liver, spleen, kidneys, sweat glands, etc). The blood is exceedingly rich in white cells. The plasma of the spleenic vein is tinged by the solution of blood cells (red). The blood of the hepatic and renal veins hardly coagulate, from which we infer these organs are destroyers of the fibrin factors in the circulating blood.

(*a*) It is claimed that the disintegration of the white blood cells afford the positive properties that constitute the fibrin ferment, their death being the main source of fibrin formation. A washed blood clot (which consists of fibrin and white blood cells) digested in an 8 per cent. solution of Na Cl affords the most intense coagulating substance, and by some, is likened to the action of rennet on the casein of milk.

(*b*) Excess of bile salts in the blood favor coagulation. The stroma of the red globules participate in forming fibrin. The presence of O seems to be necessary to coagulation.

(*c*) More fibrin is found in venous than in arterial blood. In septic fevers, etc., the quantity of fibrin seems to be increased, hence the liability to the formation of thrombi in the arteries, the white globules are also largely destroyed in this condition and the appropriation of O considerably diminished.

17. *The Chemical Composition* of plasma and serum. Plasma undergoes immediate changes as soon as removed from the living body, so we can know but little of it *per se*. Serum is plasma minus the globules and fibrin factors.

(*a*) The *soda* salts, (chloride 0.5 per cent.; hydric carbonate (Na H C O 3) 0.0027 per cent.) abound in the serum. Per 1000 parts are sodium chloride 4.92; so. sulphate 0.44; so. carbonate 0.21; so. phosphate 0.15; lime and magnesia phosphate 0.73.

(*b*) The proteids are found to the amount of 8 to 10 per cent. in plasma: paraglobulin also called serum globulin 2 to 4 per cent., soluble in 10 per cent. of Na Cl and coagulates at 167° F. Serum albumen 3 to 4 per cent., becomes turbid at 140° F.

and coagulates at 163° F. It is changed into syntonin or acid albumen by the action of dilute H Cl, and by dilute alkalies into alkali-albuminate. Other proteids are found in the serum in small quantities.

(*c*) *Fats* abound in the plasmas after a meal rich in this principle; during hunger they greatly diminish and nearly disappear during starvation. They are found most abundant during digestion in the portal and mesenteric veins. They occur as small microscopic granules in the blood and are the "molecular base" of the chyle. After a diet of rich milk and other fats the serum is "milky."—Quantity, 0.1 to 0.2 per cent. and may reach accordingly as the food is rich in fat 1 to 1.25 per cent.; average 0.4 to 0.6 per cent. Alkaline fats (soaps) cannot exist in the blood. *Cholesterin* is probably a form of fat found in the nervous tissues 0.019 to 0.314 per cent. The red globules contain no fat, in white cells a trace is claimed by some to be found, lecithin, a phosphorized substance, found in small quantities in all the fluids, brain, yolk of egg, pus, blood cells, etc. Sugar is found in mere trace 0.05 per cent. and also a trace of glycerine. Some observers contend that sugar occurs in the plasma proportionate to its ingestion and attribute to its excessive ingestion diabetis mellitus. Extractives occur in small amounts normally—urea, kreatin, hippuric acid, uric acid, hypoxanthin. Most of them are increased in diseases of the digestive organs, liver, kidneys, fevers and inflammations, struma, etc. Pigment of some kind slightly tinges the plasma. The sp. gr. of plasma (serum) 1.027 to 1.029. Water 90 per cent.; proteids 8 to 9 per cent.; fats, extractives and salts 1 to 2. The plasma is the essential constituent of the blood to the tissues, in it is all the elements of nutrition.

15. *The Red Corpuscles*—are homogeneous, biconcave round discs with rounded edges, in appearance on their flat sides, much like a biconcave lense, contain neither nucleus nor cell wall.

(*a*) *Size*—in diameter 1-3500 to 1-3200 of an inch; in thichness 1-12,400 of an inch.

(*b*) *Number*, 5,000,000 per cubic mellimetre in men, and 4,500,000 in women.

(*c*) *Histology*.—They consist of a homogeneous pale, colorless *stroma*, a soft and transparent protoplasm it is, into which the hæmoglobin permeates through and through, similar indeed as colored water permeates and is held in a sponge.

(*d*) *Color*, viewed under the microscope by transmitted light and in thin layers, they are a light amber or pale yellow; by reflected light or in thick layers they are red.

(*e*) *Consistence*, nearly fluid, very flexible, elastic and easily bent or contorted by slight pressure, but quickly regain their normal shape when free to move. While circulating in the capillaries they are seen to adapt themselves to the narrowest lumen of the smallest vessels, elongating to reduce their diameter to enable them to pass through with ease; after passing into more roomy vessels they immediately regain their shape through their property of elasticity.

(*f*) *Change of form.*—In freshly shed blood some of the red corpuscles are seen at times to assume a peculiar mulberry or prickly shape called *crenation*. It may be caused by poisoning with calabar bean, also by a 2 per cent. solution of Na Cl added to the blood. The red globules soon after being shed are seen under the microscope to arrange themselves in *rouleaux* when they appear like piles of coin knocked over. The corpuscles become sticky and adhere to each other. This may be a phase in the process of fibrination. This adhesiveness of the red corpuscles is particularly noted in parts undergoing the inflammatory process; the corpuscles are manifestly in a state of impaired life under such circumstances.

(*g*) *Reagents.*—Water causes the cells to swell and become spherical, dissolves out the hæmogobin and the stroma also in time dissolves, the serum becoming "laky," i. e., colored by the hæmogobin. Sugar or salt and other substances that increase the density of the serum serve to shrivel the discs and make them crenate; evaporation also causes this change; elevation of temperature and electricity also cause changes in the form of the discs which are in nature no doubt postmortem. Dilute acetic acid extracts the hæmoglobine leaving the colorless stroma, but this also dissolves after a time. Dilute alkalies readily dissolve the entire substance of the red blood cells. Bile acids, glycocholate and taurocholate, also fresh bile, have the same effect on the red discs. The result of all these reagents is to make the blood "laky," and laky blood is owing to the serum being colored by the dissolved hæmoglobin.

(*h*) *The structure of the stroma* is a reticulated intra nuclear plexus of fibrils occupied by the essential and vital part—the hæmoglobin; therefore the stroma is regarded as the house in

which the remainder of the substance of the corpuscles, the chief part endowed with vital phenomena, live. The corpuscles of venous blood on account of containing so much CO_2 are easily dissolved, the serum is made "laky." Complete removal of all the gases has the same effect.

16. *The Red Corpuscles* constitute 45 per cent. of human blood.

(*a*) One thousand parts of fresh red corpuscles consist of—water, 688 parts; mineral salts, 8 parts; 75 per cent. of which are potassium chloride and phosphate.

(*b*) The organic constituents consist of a colorless stroma (No. 15 g) to which the hæmoglobin is united.

17. *Hæmoglobin*, synonems, Hb; Hæmato-globulin; Hæmoto-crystaline. Per centage composition C 53.85, H 7.32, N 16.17 Fe 0.43, S 0.39, O 21.84. Its rational formula is unknown. It chrystalizes in the vertebrate according to the rhombic system, holding 3 or 4 per cent. of water. These crystals are doubly refractive and pelo-chromatic. Viewed by reflected light they are blueish red; by transmitted light scarlet red; are soluble in water, serum and dilute alkalies. Insoluble in alcohol, chloroform, ether and fats. It is colloidal and crystaloidal in nature—diffusing with difficulty yet forming crystals.

(*a*) The quantity of Hb in the blood of man is 12 to 15 per cent.; in woman's blood 12 to 14 per cent., it declines during pregnancy to 9 to 12 per cent. Its maximum is in the new born infant, declines after 10 weeks. Its minimum is between 6 months and 5 years, then it reaches its second maximum between 21 and 45 years; then sinks again as age advances. In the female from 10 years onward it is in minimum. Food rich in proteids appear to increase it. Anæmia, fever, chronic diseases, cancer, phthisis, septæmia, mercurials, chlorosis, leukæmia, etc., lower it.

18. *Hæmatin* (C 68, H 70, N 8, Fe 2, O 10). The disruption of hæmoglobin resolves it into *hæmatin* and a colorless proteid substance, globulin in nature. This is easily effected by the addition of strong alkalies, acids and heat 155°F. and whatever else will coagulate albumen. Hæmatin is a dark brown amorphous powder, or a scaly mass of metallic luster.

(*a*) All the iron in hæmoglobin (0.42 per cent.) is attached to the hæmatin.

19. *Oxyhæmoglobin* (*O2 Hb*). Hæmoglobin possesses the remarkable property of seizing on O with which it saturates itself and thus changes color from a dark purpleish red to a bright

crimson. It is a feeble chemical combination of Hæmoglobin and O. It is this property of hæmoglobin to become oxyhæmoglobin in the presence of O that gives the red blood cells their essential and vital properties in the economy. The blood while passing from the right (venous) side of the heart through the lungs takes up O from the atmosphere by virtue of the avidity of the hæmoglobin for O. Then it enters the left auricle and ventricle to be propelled through the arterial and capillary systems where it is brought in almost immediate contact with the anatomical elements of the tissues, these having a stronger attraction and avidity for O than oxyhæmoglobin snatch the O from O_2 Hb and reduce it again to the stated hæmoglobin (venous blood). The blood again reaches the right heart by the great veins, traverses again the lungs when it meets again with O and the reduced Hb again seizes on O with which it saturates itself again becoming scarlet (arterial blood) and again goes the round of the circulation to be again robbed of its O.

(*a*) O_2 Hb performs the function of a weak acid. It is found in dry human corpuscles (86.78 to 94.30 per cent.); 1.6 to 1.8 cubic centimetres of O unites with 1 gramme of Hb. It is constantly being reduced by the tissues from O_2 Hb to Hb, without undergoing the least molecular change farther than in the loss and regaining O in the tissues and in the lungs.

(*b*) Diseases that reduce the number of red blood corpuscles obviously act as slowly asphyxiating agents by reducing and limiting the only means by which O can be carried to the tissues.

20. According to Welcker, 4.400 c. cm. may be taken as the whole quantity of blood in a man. The superfices of the therein contained corpuscles equal 2816 square metres which is equal to a square surface containing 3285 square yards. 176 cubic centimetres of blood pass through the lungs in a second of time which is more than ten cubic inches, and the corpuscles in this amount of blood have a superficies of 81 square metres, which is equal to a surface having 850 square feet.

LETTER TO A MEDICAL STUDENT.

No. 1.

BY LEMON T. BEAM, M. D., JOHNSTOWN, PA.

My Dear Friend:—You ask me to write and advise you as to the best methods of medical study, or to give you suggestions as to the points most essential to professional success. With rela-

tion to methods of study, I shall leave you, for the present, entirely under the advice and direction of the Georgia Eclectic Medical College. But, before passing to indicate to you what I conceive to be some of the essentials of success, let me say a few words as to the motives which should actuate a medical student.

While the main business of the doctor relates to the efforts he is called to cure or relieve human ailments, and even for this reason he should have a liking for it, yet, my young friend, let me say to you that of all the motives for choosing the medical profession, the instinct of investigation—or what is the same thing, the love of science, is the best motive.

What object have you mainly in view in taking a collegiate course? Why are you away from home and relatives and for what purpose? Is it not that you may be cultured in the *science* to the end that you may become expert in the *art* of medicine? If so, truly the purpose is grand and the object is glorious! "What is of the most importance to the medical student?" you ask, and I would answer in a word: STUDY. Yes, my friend, to attain positive ability, or even tolerable merit, you must study, now, and henceforth until you gain the goal of your ambition.

Remember, that the delusive fame of false pretention, of assumed knowledge without possession, and of fictitious show, fades and dwindles like the fabled echo, into an empty sound. Therefore, while you aspire to gain a knowledge of the useful and the true as relates to the art and science of healing, remember again that "there is no excellence without great labor"—without persistent, systematic effort. The laurels that are won in idleness and falsehood in an hour, and the etialated leaves hang on the brow as withered emblems of false glory.

Remember, too, that the laws governing success in our profession, and as well in other walks of life, are fixed and immutable. It is not idle nor premature to instill this fact into your mind, even at the very threshold of your student career. It may serve you as well, while student, as when you become a practitioner of medicine. In fact, if you fail to learn it when a student, you may not learn it at all. What I wish to impress on your mind is, that the LAW governing success in life is as certain, fixed and immutable as that of attraction and gravitation, and is in effect a belonging of *the same law*. Let me here state two principles:

First, That the thoughts proceeding from our brains are not myths, but highly refined substances, things and realities.

Second, That in every phase and department of nature likes and likes.

Now, to become practical, if your order of thought is practical, it will attract the practical; if scheming and crafty, it will attract to you those of like nature; if artistic and refined, it attracts that character of mind; and if it dwell a great deal in the sentimental and ideal, it will isolate you from the highly and truly cultured, if not from the great mass of your race.

All persons carry the influence or power of their prevailing character of thought with them, and, as regards attraction or repulsion, it is felt by all about them. We are taught, and we teach, by something about us that never goes into language at all.

This law of sympathy or attraction, though quite unconsciously exerted, in the vast majority of instances, involves the very keystone of success in life's undertakings. If you want to gain a point, e. g., with a person: you want first, above all things, as we say in common parlance, that the person shall "take to you." Analyze your own sensations on first meeting strangers and you must acknowledge more or less force to this assertion. Why? Because you feel their thought before you hear it. You have an interior sense which "takes stock" of the individual with lightning-like rapidity, and at the same rate of speed sums up for or against him.

What you need to know is how to make favorable impression.

Remember the law: *like attracts like.* Carry with you the kind of thought that will make it. Carry with you a real live interest, in the object you aim at, or, in the business you have in hand. That is, carry with you a bright, cheerful, hopeful, determined, confident set of thoughts or frame of mind. Don't try to feign—*you must have these thoughts.* The interior sense of the person you are to meet will feel such false assumption disagreeably. That is bad for you. You've carried the wrong kind of thought with you, and it has "rubbed the fur the wrong way."

Strange as the idea may seem to you, yet true it is, my friend, that your thoughts are things tangible to others, and that your prevailing character of thought is as a garment worn by you and affecting others, either irritating as a cloak of bristles, or soothing as one of velvet. Some persons wear robes of thought enveloping them which strike you like a chill from a damp cellar or a breeze from the north side of a graveyard. Bad clothing for success.

Now comes the question, how to cultivate the agreeable style of thought, how to make for yourself these invisible garments, pleasing or the reverse to those about you. Get the best of all you need and as you need it—the very best you can—whether of brain or body food and clothing of house, home, everything. Why? Because your food, your clothing, your surroundings affect your thought and make it pleasing or the reverse according to their quality. Live poorly, and you will feel poor and abased. *Thousands are kept poor all their lives because they feel poor.* They feel poor because they live poorly. They carry their signs outside of them—signs to be felt as well as read.

How to make a commencement? Rid yourself of the air of poverty and squalor. *If you want the power you must work for the knowledge.* Build on that, and your coming into the presence of others will be as a ray of sunshine. Mr. Gloom Face repels those whom he most needs to attract. The men of success, in all departments of life, conform to this law; they may not be able to explain it, but intuitively they adopt it. *They commenced by adopting it.* If ever they were obliged to live at a 10 cent restaurant they left it as soon as possible.

So much, then, as to the law of attraction, which, by-the-way, can be used by scamps and villains as well as by honest people. For instance, the designing swindler feels agreeably toward you. If he did not for the time feel agreeably he could not make you feel so. He brings with him for the time the desire, the thought to make you feel pleasantly. If you have been careful to cultivate your interior sense—if it is very keen—you may feel the swindler's underlying motive, and he fails to make you feel confident and cheerful as he *seems* to be. The majority are not thus protected, for a reason not at all complimentary to themselves. But lest I weary you or myself, let us rest now. More anon.

STOMATITIS MATERNA.—NURSING SORE MOUTH.

BY WM. M. DURHAM, M. D., ATLANTA, GA.

Is this a modern disease—an inevitable sequence of civilization—a disease peculiar to the white race alone? Eighteen years of an active and extensive practice among a population about equally divided (whites and negroes) I have never yet met with a case of nursing sore mouth in the full blooded negress; in the same time I have treated hundreds of cases of this

painful, and often obstinate, disease in white mothers. I believe there are but few cases in which we cannot detect a cachexia (scrofula) which is brought into action by lactation. Believing this, how can we exclude the negro as not being subject to this disease, when we know that the negro race of the South, at the present time, suffer more from strumous diseases than the whites? * * * The disease is peculiar to those who are, or are about to become mothers, more frequent during the period of nursing.

We meet with it in different forms, the mild and grave or severe form. The mild form requires but little treatment, proper attention to the secretions, a regulated diet, a mild laxative occasionally, as the following pill: Enonynim, junglandin, aa gr.i, Ext. Hyoscyamous gr.½, ft. pill, take occasionally at bedtime. The improved comp. syrup stillingia with ten grains of sulphite of soda to each drachm a dessertspoonful after each meal, will cure the majority of mild cases. The treatment of the severe or protracted form I will give from case book.

Case No. XXIV, Mrs. N., of this city, mother of three children, youngest six months old, has suffered with a severe sore mouth while nursing all her children. Had to wean first two children before she could get any relief. Mouth is very sore and painful. Tongue very red, feels as if it has been scalded. Mucous membrane of mouth covered with aphthaous looking patches, diarrhœa, anæma, emaciated; can take but little nourishment; urine specific gravity 1.026, very acid; suffers with pain in umbilical region, back and thighs. Has been under treatment of family physician since birth of last child, is very despondent, does not believe she can be cured as she has suffered so long, without any relief. Has frequent spells of headache, also spells of vomiting. Treatment: ℞. Tr. nux vomica, gtts. v, three times a day before meals. ℞. Populin (Keithes) ʒi; bicarb. potassa, ʒi; bicarb. soda, ℥ss; tr. myrrh, ℥ss; aqua q. s., ℥xii. Mix. Sig.—Dessertspoonful three times a day before meals in a wine glass of water. ℞. Powdered bayberry; powdered blue cohosh; powdered witchhazel leaves, aa ʒi. Mix. Infuse in a pint of boiling water and wash the mouth frequently with it. Three weeks from the commencement of above treatment she said that the mouth was well, appetite returned, diarrhœa stopped, no headache, no sick stomach, still nursing her child. Discontinued the nux vomica and substituted the follow-

ing pill: R. Ferri sulph, e. ac., gr.i; hydastis pulv., gr.½; bayberry pulv., gr.ij; res terbenthi q. s. Ft. pill. Sig. Take three times a day before meals. Continued the populin mixture three more weeks and then gave the following in place of it: R. comp. syrup stillingia (improved) with two grains of iodide of potassium. Dessertspoonful three times a day after meals. In two months more she was restored, in perfect health.

Case XXXVIII, Mrs. W. P. H., Crawfordville, Ga., applied to me by letter for treatment. History and symptoms: Sore tongue and mouth, mouth ulcerated, child four months old, mouth been sore since birth of child, no appetite, very feeble, confined to bed. Been under treatment of family physician ever since birth of child, but gets worse. Treatment: Tr. nux vomica gtts.v, three times a day before meals. R. Syrup stillingia comp., ℥xii; sulphite soda (gran.) ʒiv. Mix. Sig. Dessertspoonful three times a day after meals. R. Iod. potassium, gr.xx; biniodide mercury, gr.x; aqua, ℥ij Mix. Sig. Six drops in a tablespoonful of water and mop the tongue and mouth several times a day with it. Heard nothing from this case until three months afterwards when her husband, who is a commercial traveler, called in my office to settle his bill, which he said he would pay more cheerfully than he ever did a medical account before, as he had paid fifty dollars for treating his wife previous to calling on me for treatment without any benefit whatever, and that the medicine I sent her acted like magic, curing his wife in a few weeks.

I could give many other such cases but it is not necessary. Alterative and tonic treatment is indispensible. I never rely upon local treatment. I always advise my patients to continue the treatment as long as they nurse the child. Of course we diet our patients; otherwise our treatment will do no good.

LOBELIA AS A CARDIAC REMEDY.

BY J. N. SHAW, M. D., GRAND RIDGE, ARKANSAS.

The action of the above remedy in some phases of cardiac disease where the patient is liable to attacks resulting from various causes, is marked in the relief it affords in many instances. The following case will afford an illustration of this action when the specific indications for the remedy are prominent:

Was called to see Mrs. D. about 9 o'clock p. m., supposed to

be at the point of death. On my arrival I found the patient propped up in bed, the respiration being very difficult, in fact almost gasping for breath. The hands and feet were very cold, a clammy perspiration on face and hands, no pulse at the wrist, complains of pain over the region of the heart, also a sense of oppression as if a weight were pressing on the chest and a feeling of impending dissolution unless quickly relieved. The heart's action was labored, anseultation detected slight rasping sound over that region, belching was a prominent symptom caused by the patient having drank a large quantity of sour butter-milk, and she also stated that any indiscretion in diet brought on a similar attack but usually not so severe. The remedy indicated for the urgent symptoms being lobelia—xxx drops of a (strong) tinct. of the seed were added to half a glass of water, a teaspoonful to be given every fifteen minutes. After the first dose patient felt easier, as the second dose was given the supports were removed at patient's request; by time for the third dose she was entirely relieved, pulse became normal, breathing regular and easy; about fifteen grains of phosphate of soda was given, she fell into a sound slumber; another dose of the soda to be taken in the morning. Saw patient in two such similar attacks at different periods, with same success as to treatment, two doses being all that was required. Tr. cactus, ʒi to ℥iv, water, in teaspoonful doses was tried, which failed to give the slightest relief. The patient keeps the remedy which she has used without failure in a single instance. As precious things come in small packages I don't furnish much of it at a time.

SOME OF THE THERAPEUTIC PROPERTIES OF SEPIA.

BY LIZZIE ABBOTT, M. D., BREMEN, ALA.

Please allow me space in your valuable journal to report one case. I desire to do so to give the profession further information as regards the virtues of sepia in uterine troubles.

Mrs. W. M., age 39, was suffering excruciatingly with pain in the uterus, small of back and lower extremities. I prescribed pulsatila 3-x and water pepper 3-x, aa gtts. xv, in aqua ℥iij. Directed 1 teaspoonful every 15 minutes. Also unicorn powdered, grs ii, every hour, and aconite 1-x gtts. xxx in ℥iij water, 1 teaspoonful every 30 minutes, which controlled the febrile excitement, but the pain continued; after four hours I discontinued

pulsatilla, water pepper and unicorn, and gave sepia 6-x grs. ij every hour, the second dose gave perfect relief. I then placed her under treatment for 1 month upon the following: Sepia 6-x grs. ij, ter die; nux vomica, 3-x grs. ii; 1 dose at 3 and 8 every p. m. Powdered senna, cimicifuga and unicorn, aa grs. i, ter die; before the expiration of the month she expressed herself as feeling better than for years past.

I would advise the profession to try sepia in every case of uterine trouble. Prof. Goss spoke very favorably of its action in his lectures, but he could not commend it too highly. It has never failed in my hand. I always use it in the high trituration, and in reply to some inquiries I have recently received, I would state in connection with above, what I mean by trituration and dilution, or 1-x, 2-x, etc. To triturate take 1 gr. of any powder you desire and triturate with 9 grs sugar of milk, that is 1-x, then for 2-x take the 10 grs. or 1-x and add 90 grs. sugar of milk, etc., till you carry it as high as you desire, always increasing 9 grs. sugar of milk to 1 gr. of former trituration. For dilutions, follow same ratio, always using best alcohol. I triturate and dilute nearly all the medicines I prescribe.

ENLARGED PROSTATE OF OLD MEN,

Seldom trouble unless some cystitis or prostatitis of even the most trivial nature are at work. In point of fact, we have impressed on our class the necessity of warning an aged man against retaining his urine when he first feels the desire to urinate. He must at once pass his water and not allow the urine to accumulate. Recollecting that an enlarged prostrate causes a dam to be formed at the outlet of the bladder, and to empty this organ under these circumstances requires a strong effort of the bladder to throw the last fourth part of the urine over this dam, therefore anything that will weaken the bladder will fail to ensure its complete evacuation and stale urine will always be left over. No, we say, nothing goes farther to engender cystitis than the retention of stale urine, or in other words, the incomplete emptying of the bladder where the prostate is enlarged. Another danger in not emptying the bladder completely is in the paresis it inflicts on the musculature of the bladder by weakening its expulsive powers, this also causes cystitis and a large development of the fibrous elements in the bladder while the muscular fibres become at the same time degenerated more or less. Teach your

patient that he must see to it that he empties his bladder completely, that he takes time to do so, for he will find often, when he thinks he has completely emptied the organ, by waiting a few seconds longer another half ounce or ounce of urine will be passed. When stale urine remains it is sure to cause ammoniacal changes in all the urine as fast as it reaches the bladder from the ureters, and this is sure to cause catarrh in the mucous coat and then cystitis and at last prostatitis.

We find when the organ is weakened from disregard of the above rules, and if a man is addicted to whisky or beer potations, and eats much animal food, and is liable to be exposed to cold and damp, a sudden attack of retention comes on owing to swelling of prostate and œdema and engorgement of the mucous membrane of the prostatic urethra and the prostate itself.

These sudden retentions are best treated with gelseminum in pretty pronounced doses. We have seen doses ʒss of a good tincture given with the best results, and by the aid of a hip bath and plenty of warm teas and some bicarbonate of potassium to neutralize the urine, the attack has been quickly overcome and the urine pass.

In healing, these cases of enlarged prostate, especially where the bladder is weakened and some systitis, we have obtained splendid results from a combination of good fresh preparations of ergot and rhus aromatica. In some cases of weakened bladder, we resort to the hypodermic injection of ergot and nothing excels for this method of use the normal fluid ergot put up by P. D. & Co. We evaporate off the alcohols, then add a trifle of water and inject half a drachm *in the perineum*, deep into the tissues. This is worthy of all praise and the best way we have yet found to cause a reductien of the hypertrophic gland; in the mean while we use the fl. ex. of rhus tox in doses of 20*m* to 30*m* in water three times a day. Quinine we find peculiarly obnoxious to old men with enlarged prostate. Look well to the food and avoid all articles that tend to make the urine acid (animal food in excess, beer, and whisky). Some citrate of potash occasionally may be of considerable service in keeping the urine neutral. All things that aggravate the dyspepsia must be avoided, and the skin must be well protected with flannel, and the shoes light and warm.

Old men with enlarged prostate are in constant danger of acute retention unless the safeguards we have noted above are carefully regarded and acted on.

ABSTRACTS.

TREATMENT OF ŒDEMA OF THE PREPUCE.—Dr. J. G. Tapper gives the following treatment of œdema of the prepuce, in the New York Medical Journal:

For several years past I have been treating a class of cases in a way so entirely successful, as compared with the methods given in our text-books and those usually taught in medical schools, that I have thought it might be of value to some of your many readers. I refer to the great œdema and infiltration attending many cases of phymosis paraphymosis as the result of congenital or specific cases. In many cases occurring in the adult we find a perfect horror of being confined to the bed. In fact, unpleasant circumstances connected with the trouble render it imperative that our patient should engage in his usual occupation during the treatment. These requirements have led me to the adoption of the following measures: I saturate a given quantity of absorbant cotton with chemically pure glycerin in which bichloride of mercury has been dissolved in proportions varying from 1 in 1,000 to 1 in 5,000, according to the amount of fœtor present; or, in place of the bichloride, iodoform, carbolic acid, or any antiseptic agent preferred may be used. With the cotton so charged I completely encircle the organ so far as it is involved. Over this I draw a large rubber condom, which is then suspended from an abdominal band. This dressing is to be repeated every six hours until the œdematous condition disappears. At that a beginning will be observed, and often in from twelve to twenty hours the prepuce will have become very pale and shriveled. The great majority of cases yield promptly, and no further progress is observed after the first application. If ulcers are present, it will often be discovered that they have taken on a healthy action before it has been possible to expose them, and not infrequently this progresses until the cure is completed. The advantages of this dressing are: It is cleanly; there is no difficulty in applying it, patients frequently continuing the treatment at their rooms or places of business after the first dressing; it does not expose or confine the patient; and the results, in my hands and in those of others who have tried it at my suggestion, have been very satisfactory.

A NEW METHOD OF APPLYING THE PLASTER JACKET FOR ORGANIC DISEASE OF THE SPINE.—Dr. A. B. Hirsh (Med. and Surg. Rep.) describes the "Hammock Mode of Applying the Plaster Jacket," as he witnessed it done by Professor Nancrede at St. Christopher's Hospital. A poorly nourished boy, eight years old, had the jacket applied for a posterior dorso-lumbar curvature. A piece of ordinary "ten ounce burlap"—the bagging used to wrap around rolls of carpet—seven feet long and three feet wide was suspended between the sides of the room. Each end of the canvass had a casing about one and one-half inches wide, strongly sewn, and a rope drawn through the space thus made (so as to bunch the end) which was attached to a heavy hook or ring screwed into the wall, with a compound pulley and rope to render taut the swing. The lad, devoid of clothes except a woolen undervest, was placed in this hammock, face downward, and feet and hands extended—the latter grasping the sides of the hammock, so as to exercise some extension —and a hole was cut through the bottom of the swing opposite to the nose and mouth, so as to allow him to breathe easily. The usual abdominal pad was fitted and the hammock was kept well balanced. The hammock was then cut transversely on a level with and down to the iliac crests; the same was done at the upper margins of the axillæ. The flaps thus formed were folded around the body, the surplus portion removed, and the whole roughly sewn up, thus forming a second undervest around the woolen. Starting from above, the bandage was carried around the body until the deformity was completely covered, the canvas being included in the turns. After the plaster had set, the patient was taken from the swing by cutting loose the burlap above and below the jacket. At no time was discomfort complained of. Professor Nancrede says that this hammock achieves all the good and obviates all the objectionable features of Sayre's swing. The position in the hammock effaced the curves, and by leverages tended to separate the anterior surfaces of the vertebral bodies. The degree to which the hammock was allowed to "sag" would determine the amount of extension exerted upon the spine. This method is cheap, comfortable and *always* available, without any special apparatus beyond bagging, ropes, strong screw hooks, staples, or some similar contrivance. The patient may be allowed to swing for hours, until the plaster is perfectly dry, thus obviating the risk of breaking or cracking

the jacket, which sometimes happens when the patient is taken down too soon from Sayre's swing, on account of fainting, etc. The screaming, struggling and terror, so common with children, is all done away with.—*Health Record.*

FAITH HEALING.—The Century for March has two articles on faith-cure--one *pro*, the other *con.* From the latter, from Rev. Dr. Buckley, we quote as follows: "Families have been broken up by the doctrine taught in some of the leading faith-homes that friends who do not believe this truth are to be separated from because of the weakening effect of their disbelief upon faith, and a most heart rending letter has reached me from a gentleman whose mother and sister are now residing in a faith institution not far from this city, refusing all intercourse with their friends, and neglecting the most obvious duties of life.

"Certain advocates of faith-healing and faith-homes have influenced women to leave their husbands and parents and reside in the homes, and have persuaded them to give thousands of dollars for their purposes, on the ground that 'the Lord had need of the money.'

"This system is connected with every other superstition. The Bible is used as a book of magic. Many open it at random, expecting to be guided by the first passage that they see, as Peter was told to open the mouth of the first fish that came up and he would find in it a piece of money. A missionary of high standing with whom I am acquainted was cured of this form of superstition by consulting the Bible on an important matter of Christian duty, and the passage that met his gaze was, 'Hell from beneath is moved to meet thee at thy coming.' Paganism can produce nothing more superstitious than this, though many other Christians instead of 'searching the Scriptures,' still try to use the Bible as a divining rod.

"It feeds upon impressions, makes great use of dreams and signs and statements foreign to truth and pernicious in their influence. A young lady long ill was visited by a minister who prayed with her, and in great joy arose from his knees and said, 'Jennie, you are sure to recover. Dismiss all fear. *The Lord has revealed it all to me.*' Soon after, physicians in consultation decided that she had cancer of the stomach, of which she subsequently died. The person who had received the impression that she would recover, when met by the pastor of the family,

said "Jennie will certainly get well. The Lord will raise her up. He has revealed it to me.' 'Well,' said the minister, 'she has not the nervous disease she had some years ago. The physicians have decided that she has cancer of the stomach.' 'Oh, well,' was the reply, 'if that is the case, she is sure to die.'

"A family living in the city of St. Louis had a daughter who was very ill. The members of this family were well acquainted with one of the leading advocates of faith-healing in the East, who made her case a subject of prayer, and wrote her a letter declaring that she would certainly be cured, and the Lord had revealed it to him. The letter arrived in St. Louis one day after her death.

"These are cases not taken from the operations of recognized fanatics, but from those of leading lights in this *ignis fatuus* movement.

"It is a means of obtaining money under false pretenses. Some who promulgate these views are honest, but underneath their proceedings runs a subtle sophistry. They establish institutions which they call faith-homes, declaring that they are supported entirely by faith, and that they use no means to make their work known or to persuade persons to contribute. Meanwhile they advertise their work and institutions in every possible way, publishing reports in which, though in many instances wanting in business accuracy, they exhibit the most cunning wisdom of the children of this world. * * *

"The horrible mixture of superstition and blasphemy to which these views frequently lead is not known to all persons. I quote from a paper published in Newark, N. J., in the interest of faith-healing:

"'DEATH.—Three of the richest men in Ocean Park, N. J., have died. Faitn-healing has been taught in the place, but was rejected by them, so death came.'

"'CHNRLESTON, S. C.—A few years ago the Holy Ghost sent me to preach in that city. But they rejected the Gospel and me. A wicked man shot at me and tried to kill me, but God saved me so that I was not harmed. * * * But I had to leave Charleston and do as the great Head of the Church said: * * "when ye depart out of that house or city, shake off the dust from your feet." Earthquake, September 1, 1886, one-half the city in ruins. It has a population of about fifty thousand people. Ye wicked cities in the world, take warning! God lives!'"

[The faith-cure craze is claimed to be on the advancing march. To us it is nothing above a purely heathen superstition of the most vulgar order.—ED. GA. E. M. J.]

THE "GELETIN BANDAGE."—As a substitute for those greasy abominations—ointments—in all kinds of skin diseases where you desire to see the part affected and still cover it from the air or protect it from the touch of clothes, and yet have it easily removed, the gelatin bandage is vastly in advance of the ointment. *They* (the ointments) are dirty; they stain the clothes; they cannot be permanently applied without bandages, and even then the cloth will absorb them; they are hard to wash off, and there are many other objections to their use, in a large number of cases. Now, to meet all these objections I submit the gelatin bandage, as used in Prague with so much success. *It is not a bandage;* it consists of pure gelatin to twice as much distilled water. After heating it, and whatever you wish—chrysarcbin, ovide of zinc, cabolic acid, salicylic, boracic, iodoform—whatever you wish—then apply with a soft brush or a feather (I use my finger), and as it is drying, run your finger over it with glycerine, a thin coating, to keep it from cracking. It is splendid for psoriasis, and completely hides the stains of chrysophanic acid.

A slight modification of this has long been used for burns and scalds and fresh injuries in New York hospitals—white glue, one-half pound; glycerine, one ounce; carbolic acid, two drachms; and boiling water, one pint. Keep in a close capped jar and heat the quantity you require ready in your office, and you will find it an excellent application. It is a decided improvement on the abominable linseed oil and lime water.

Time does not permit me to go thoroughly into the uses of this gelatin bandage, or I am sure you would think it better than anything you have heretofore used in its particular range of application.—J. E. White, M. D., in *Canadian Practitioner.*

FIBROID TUMOR OF THE WOMB—RADICAL CURE BY THE USE OF ERGOT.—Dr. F. L. Marsh, in the Philadelphia Medical and Surgical Report, says: Mrs. M., multiparæ, aged thirty-seven, began about four years ago to lose a great deal of blood at her menstrual periods. Later her losses of blood were at very short intervals.

On the 21st of September, I found her in a very exhausted condition; hemorrhage profuse, pulse scarcely perceptible, and, in fact, in imminent danger of dying. Upon examination I found an enlarged womb, the sound passing four and a half inches along the anterior uterine wall, but meeting with an obstruction in the posterior. I at once tamponed the vagina, gave stimulants, and administered, hypodermically, two grains of ergotine.

September 22d. The os not being sufficiently open, a further examination, after dilating the neck with sponge tents, revealed an interstitial fibroid, occupying almost the whole posterior wall and fundus. I injected again, hypodermically, one grain of ergotine, and continued the use of the drug in this way once in twenty-four hours for one week. I then ordered her fl. ext. ergot and potassium bromide, twenty drops of the former and ten grains of the latter, three times daily, before meals.

Three months later the hemorrhage was materially lessened, and an examination of the uterus indicated the tumor smaller in size. After this she took daily from sixty to ninety drops of ergot, and thirty grains of the bromide for ten months longer, when the hemorrhage had entirely ceased, and the tumor, which had been growing smaller from time to time, was found to have entirely disappeared. Her general condition improved rapidly. The uterine measurement shows the womb normal in size.

This case demonstrated to my mind the possibility of total absorption of uterine fibroids by the long-continued use of ergot.

I am positive as to my diagnosis, and satisfied myself completely that no portion of the tumor passed from the vagina. One other supposition is, that the tumor may have become superto-neal. A careful examination excludes that.

During the last five years I have treated eight cases of uterine fibroids. Ergot was administered in all, with the view of lessening hemorrhage and facilitating operative measures. In two cases of submucous fibroids, especially, was the effect of the drug manifest by the ergotic contraction of the womb, and the consequent squeezing of the tumor through the os uteri.

CAFFEINE.—Caffeine found in coffee contains from 0.8 per cent. to 1.0 per cent.; in tea 1.5 per cent. to 4 per cent.; in mate or Paraguay tea 1.1 per cent. to 1.25 per cent.; in colanut 3 per cent., and in guarana, which contains 5 per cent.

The effect of caffeine is not identical with coffee or tea, or the other drugs containing it, in which its effects are modified by the other constituents. Extensive research has proved caffeine to excite the heart and respiratory movements, and increase arterial tension, stimulate the brain and spinal cord, retard tissue change and increase the flow of urine. Caffeine has been in use so long now, and its applications have become so numerous, that it may suffice to mention but a few of the most important. It is the remedy *par excellence* in headache, especially in the so-called nervous or sick-headache, or when due to fatigue or overwork, or the abuse of intoxicating liquors. It is used as an antidote in opium poisoning, as a diuretic, especially in dropsical effusions from heart disease. Dose, from 2 to 5 grains. Of the numerous salts of caffeine the citrate and bromide have met with most favor, being perfectly soluble and not delinquescent. It may be used by the mouth or hypodermically.—*Technics.*

LIQUOR MAGNESII BROMIDE.—Under this name an aqueous solution of magnesium bromide has originated and been employed in the Philadelphia Hospital, more particularly in the insane department of that institution, with such success as to warrant its more general trial and employment. Drs. Henry DaCosta and Brooke, of this city, have each employed it in insane practice, and have found it to be a decided sedative in its action upon the nervous system, having no unpleasant after effects and evincing, in a number of instances, a cathartic action. As the subject may be a matter of pharmaceutical interest and inquiry in the future, I desire to communicate to you the formula I originated, which is as follows: ℞. Take of acid hydrobromic. Dilute (U. S. P., 1880), pint, magnes carbonate to neutralize (or about one troy ounce); filter. Each teaspoonful contains 7 (exactly 6.97) grains of anhydrous magnesium bromide. Dose, one to two fluid drachms.—*Am. Journal Pharmacy, Nov.* 1886, Joseph W. England, Ph. G.

IODIDE OF SODIUM IN ORGANIC DISEASE OF THE VALVES OF THE HEART AND THE ARTERIES is not a new remedy in these affections but one too much neglected. Dr. Huchard, of Paris, has brought forward abundant clinical evidence to prove how efficient is this medicament in valvular diseases of the heart and atheroma of the arteries, chronic aortitis, angina pectoris vege-

tations, chronic endo-carditis, etc., under its use the valvular diseases as shown by the murmurs being present, are, if not totally cured, very much bettered so as to leave these patients in excellent conditions of restored health and well-being.

The medicament must be steadily, persistedly administered for months or, even if necessary, years, in doses of 5 to 15 grains three times a day. In this way well marked cases of valvular diseases and aortitis were cured, so that none of the evidences of the pathological conditions could be detected. Also by this treatment did Dr. Huchard cure well marked cases of angina pectoris and of long standing.

SULPHATE OF SPARTEINE.—We have previously referred to the action of this drug upon the heart. A recent investigator (Voigt), referred to in the Lancet, finds that small doses from one to four milligrammes, raises arterial pressure, and increases the efficiency of the cardiac contractions, and increases the number of heart beats. These effects occur soon after the administration of the agent and continue for twenty-four hours. It does not always regulate the rhythm of the beats, and should be discontinued, the author thinks, after a prolonged use for fear of cumulative effects.

As the improvement of the heart's action occurs, diuresis seems to take place. The sedative effects are marked and in every way beneficial. The agent will yet fill an important place in therapeutics.—*Chicago Medical Times.*

BEWARE OF—Corn doctors who don't extricate corns.

Ear doctors who advertise sure cures for deafness.

Lotteries of all descriptions, which are a delusion and a snare.

Lawyers who volunteer their services from "charitable motives."

Land schemes in Florida and elsewhere which give "homes" away.

The lightning-rod man who is willing to take your notes for work performed.

Civiale remedial agencies, which are generally advertised through the papers.

Bohemian oats, whose manipulators are extending their operations in various directions.

English sterling cutlery, which is advertised by bogus companies at very low prices.

Fraudulent employment bureaus which guarantee permanent employment if you pay your initiation fee.

Medical institutes whose professors advertise themselves and great cures through the country generally.

Magnetic appliances which are advertised to cure all physical infirmities, from disordered brain to a sore foot.

Solid gold plate watches, which are advertised all over the country by Bordon, Edwards & Co., New York.

Brokers and bankers who send you printed circulars guaranteeing fortunes if you invest small margins through them.

Bogus detective agencies whose representatives work for a small consideration, and are as liable to betray you as to serve you.

Bogus agricultural newspapers which have a nominal subscription price, and are published to circulate description of various wares in the mails under the head of second-class matter.—*American Agriculturist.*

CHROMIC ACID IN ENDOCERVICITITIS.—Dr. J. C. Kirk, in the Practitioner, says, "there is one condition of the cervix uteri which resists all ordinary methods of treatment. I refer to that obstinate form of endocervicititis in which a discharge quite similar to the white of an egg is poured out in great quantities. In all forms of cervical catarrh this secretion is produced more or less, but in the form I refer to, the glands are remarkably active, and produce immense quantities of this discharge. As said before, the ordinary forms of astringent and caustic applications will not cure this condition. I have found but one remedy that will cure these cases, namely, an aqueous solution of chromic acid (ʒj to aqua ʒj). Four or five applications of this remedy, at intervals of a week, usually suffice."

MEMBRANOUS CROUP.—The following has been used in membranous croup with very satisfactory results: ℞ Ex. fl. jaborandi, ʒiv; ext. fl. eucalyptus, ʒiv. M. Sig.—Ten drops every two hours. The nourishment to consist of hot milk taken every two hours. Stillingia liniments to be applied externally every one, two or three hours.

The following has been used with good results in cases of anæmia in patients suffering with fistula or old chronic ulcers: ℞. Syr. ferri iodide, ʒi; liquor strychnia, ʒiss; syr. simp., ad. qs., ʒiv. M. Sig.—Teaspoonful three times a day.

BORACINE.—Dr Thornton Parker states that the compound to which this name has been given consists of boric acid, glycerine, menthl salicylate, menthol, thymol, and eucalyptol. Used in solution it is a satisfactory dressing for wounds, there is no danger from poisoning, and it does not produce inflammation of the wound or surrounding tissues. It is useful in chronic otorrhœa or chronic discharge from the nasal passages, also for diseases of the rectum. Used as a thick paste it is well adapted for treatment of chronic ulcers of the legs. As an injection in cystitis or for diseases of the eye it is also useful, and it has given excellent results in the treatment of chronic eczema of the scalp.—*Journal of the Am. Med. Association.*

PRESERVATION OF SALICYLATE OF SODIUM.—If crystalized or powdered salicylate of sodium is placed in a glass vessel and exposed to the light for about four or six weeks it darkens, loses its acid reaction and forms dark solutions, whilst the same, protected from light, remains colorless and preserves its reaction. Salicylate of sodium is also affected by moisture; when kept in perfectly dry bottles and sheltered from light no change is produced, but when kept in paper it soon becomes gray and inert. Solutions of salicylate of sodium made with spring-water soon darken, but when made with distilled water no change occurs.—*Nouveaux Remedes*, ii, 379.

LOCAL USE OF FL EXT. OF JABORANDI IN INFLAMMATIONS OF THE SKIN is extoled by Dr. Robinson in the Therapeutic Gazette, in erysipelas and eczema. It is painted on the affected part full strength and repeated several times a day. It appears equally serviceable in chronic and acute eczema, and to afford remarkable relief to the itching and pains. Prof. Durham uses it liberally in puritus pudenda in the same way with splendid success.

PECULIAR NEUROSIS.—Dr. Aveling, Lancet, reports a case in which a woman, aged 38 years, was struck on her left eye by one of her children. Six weeks after something was wrong with the eye, noises in the ears, tenderness in the nose and pain in the back were observed. The symptoms gradually became worse and headache was constant. Treatment by eminent physicians gave little or no relief. Examination showed extreme anteversion of the uterus. Replacement and support by pessary relieved the patient of numerous ailments.

BENZOATE OF SODA is another non-depressing soda salt, although it is somewhat anti-pyretic when given in large doses. It is a solvent of uric acid, increases the elimination of urates in rheumatic lithiasis, and seems not only to convert uric acid into hippuric, but also to liberate a portion of the products of disassimilation in the form of soluble hippuric acid insoluble uric. Chronic rheumatism in delicate and sensitive patients benzoate of soda may be given with aromatic spirits of ammonia, thus: R. Sodii benzoatis, ʒvj; spts. ammon. aromat., ʒvj; spts. myristicæ, ʒvi; spts. chloroformi, ʒij; spts. gaultheria, ad. ℥vj. M. S.—ʒj. to ʒij in water.—*J. C. Peters.*

The hippurate of soda has been suggested lately in doses of five to thirty grains. It tends to produce soluble urates. A favorite prescription with Granville is: R. Sodii hippuratis, ʒij; glycerine, ʒvj; aq. cinnamomi, ad. ℥vj. Sig.—ʒij to ʒviii, three times a day.

MALFORMED GENITALS.—The London Medical Record gave an account of Faustona Maura, aged 51, who had passed for a woman over fifty years. She [he] was married to a man ten years; but married life was not satisfactory, sexually. As an experiment a neighbor's wife was borrowed and sexual intercourse was more satisfactory. When about 51, examination was made. The general appearance was that of a man except the genitals. The supposed external labia were the divided scrotum, each labium containing a normal testicle. The penis, when flaccid, was 4½ centimetres long, when erect 9. The fissure was formed by the urethal canal.

LARYNGEAL TUBERCULOSIS.—Dr. B. Tauber, for laryngeal tuberculosis in its advanced stage when deglutition becomes very difficult, recommends, Medical News, as a local application: R. Acidi carbolici, ʒjss; tinct. iodini, ℥ss; glycerinæ, ʒij. M. This application produces a whitish eschar and gives to the thickened and ulcerated parts an artificial covering, a protection, and a prolonged anæsthesia. The anæsthesia lasts eight to ten hours, during which time the patient can eat and drink with considerable ease.

KNODALIN.—A mixture highly recommended for the destruction of all kinds of vermin on plants, consists, according to Baren-

thin, of 2 to 3 grams nitrobenzol, 10 grams xanthogenate of potassium, 400 grams potash soap, containing about 60 per cent. of water, and 600 grams amylic alcohol. Knodalin is reddish-brown, oily liquid, having an alkaline reaction and a strong odor of amylic alcohol.—*Archiv der Pharm.* 1886, xiii, p. 673.

VASELINE IN SCARLET FEVER.—Dr. J. B. Johnson, Medical and Surgical Journal, says: I have found nothing so efficient in relieving the burning and itching sensations of the eruption of scarlet fever as the inunction of the whole body with vaseline. The vaseline is simply used by being well rubbed upon the surface of the body with the hand once or twice a day, and continued as long as the patient complains of burning and itching of the skin.

HÆMORRHOIDS.—Dr. G. W. Hamer speaks, Columbus Medical Journal, in high terms of *Convallaria multiflora* in the treatment of hæmorrhoids. He recommends one or two ounces of the root boiled in a pint of sweet milk to be taken in twelve hours, in about two ounce doses. He reports several cases in which the results were very satisfactory.

CHARACTERISTIC REACTION BETWEEN APOMORPHINE AND COCAINE.—When a dilute solution of apomorphine is added to a dilute solution of cocaine hydrochlorate a green coloration is produced. The reaction takes place in several minutes, and being very delicate, can be used as a reagent.—*Phar. Rundschau, Prag*, xii, p. 614.

A NEW CEMENT for bottles containing very volatile liquids, is composed of very finely ground litharge and glycerine, and it is merely painted around the joint between the bottle and the cork or stopper. It quickly dries and becomes extremely hard, but can be easily scraped off with a knife when it is necessary to open the bottle.

NAPHTHALIN LEAVES FOR EXTERMINATING MOTHS are prepared by melting together carbolic acid and ceresin each 1 part, naphthalin 2 parts, and painting on sheets of unglazed paper.—*Phar. Rundschau, Prag*, xii, p. 594.

TO REMOVE IRON RUST FROM WHITE GOODS.—Wet the spots thoroughly with lemon juice and salt, mixed, and then place in the sun.

If ink is spilled on a carpet or woolen table cover, put on immediately a thick layer of common salt. When this has absorbed all the ink possible, scrape off with a spoon and apply more. Keep doing this until all the ink has been taken up.

NITROGLYCERIN is best given in alcoholic solution. The dose is from 1-150 to 1-60 grain, repeated several times a day. Rossbach prefers ether as a solvent. His formula for its use is as follows: Dissolve 1½ grain of nitroglycerin in sufficient ether, and add the solution to a mixture consisting of 2 ounces of powdered chocolate and 1 ounce of powdered gum arabic. Mix very thoroughly, and divide into 200 pastilles. Each pastille will thus contain 1-333 grain of nitroglycerin. Used in angina pectoris, and as a diuretic.

TO RESTOE LINEN THAT HAS LONG BEEN STAINED.—Rub spots on both sides with wet brown soap and cover the soaped places with a thick paste of starch and water. Then expose the linen to the sun and air and if the stains have not disappeared in three or four days, rub off the mixture and repeat the process.

TO TAKE OUT WINE, PEACH AND ALL KINDS OF FRUIT STAINS FROM TABLE LINEN.—Dissolve two ounces of chloride of lime in one pint of water, stirring until there are no lumps. Dissolve also two ounces of sal soda in one pint of warm water. Mix together and let it stand until clear. Then pour into a bottle and cork tight. When used add one-third clear water.

PSORIASIS.—Dr. G. T. Elliot, New York Medical Journal, speaks highly of: ℞. Acidi pyrogallici, ʒjss ad ʒij; acidi salicylici, ʒss; collodii flex., ℥ij. M. Fl. sal. Painted over the eruption of psoriasis every one to three days. The scales should be removed by bathing in warm water, the parts well dried, and then the solution applied so as to extend half to one on healthy tissue.

HÆMOSTATIC.—Dr. Spaak employs, Journal de Medicin, chloroform water, one per cent. of chloroform, as a hæmostatic in operations upon the mouth and the same in spray after excision of the tonsils.

PICROTOXIN.—In aqueous solution. Dose from ⅛ to ⅙ grain. Used in epilepsy.

EDITORIAL

PARALDEHYDE is a safer hypnotic than chloral and much more certain to produce sleep. The dose runs all the way from 20*m* to ʒn, according to the sensibility of the patient. It is powerfully depressant on the mechulla oblongata but not to the dangerous extent chloral is. It produces sleep in painful states of the body and procures rest and sleep in febrile patients.

SUCCUS ALTERANS.—Messrs. Eli, Lilly & Company, Indianapolis, Indiana, are manufacturers of this valuable alterative compound, so highly indorsed by the late Prof. Marion Sims, M.D. Read the advertisement and correspond. Send to Eli, Lilly & Co. for a copy of their valuable Monthly and mention this journal.

PRACTICAL POINTS.—A tincture of the recent pulsatilla is a pretty sure medicament in the treatment of orchitis—so is the tinct. of phytolacca, or tinct. of polymnia uvidalia. We learned from an old practitioner that these three combined is a dead shot on a threatened suppuration of the female mammory gland after parturition.

Bichromate of potassium and biniodide of mercury, aa 1-50th grain, rubbed up with 10 grains of sugar of milk and taken every three or four hours will cure many of the worst cases of chronic laryngitis. We have cured a bad case with this formula. Last winter we had several severe cases of dysentery which we treated with the above "formula" in short metre. The striking features of its action were relief of the tormina and tenesmus before either the nature or frequency of the evacuations were modified in the least.

GROWTH OF QUACKERY is a theme the allopaths delight to contemplate and expatiate upon. There was a time when the best allopathic doctors lost from 35 to 65 per cent. of their patients, and they were hauled out of this nearly wholesale legal killing by the progressive schools, for it was simply by regarding allopathy as quackery that the new schools forced the old school doctors out of their shockingly bad methods of treatment. Where are the allopaths to-day? Look at their books written

to-day and compare them with the books they wrote 20 years ago! There is change enough to stagger you. But then continue the critical investigation a trifle further and by comparing the books allopaths write to-day with the books eclectics wrote twenty-five years ago and you are astonished to find how singularly they resemble each other. Eclectics are still thirty years ahead. Well! yes, it is too true that the quacks and the quackery of the past were the orthodoxy of that day, and the orthodoxy of to-day is as much of a grand bigot as it was fifty years ago. The nearer allopaths are tracked to the eclectic camp the louder are the allopaths in their vituperation and the tighter they screw up their code to the orthodox standard. But the world progresses all the same.

PHYSIOLOGICAL ACTION OF THE BROMIDES are worthy of careful notice inasmuch as several bases in combination with bromine produce different effects. Bromide of ammonium is a gentle diffusible stimulant to the centres while it, as the medicament, controls the reflux activity of these centres. It will slow the heart yet not produce lowering of blood pressure by impairing the cardiac muscle. It is the remedy where you have weak heart and low blood pressure associated with excited and reflex irritability of the centres. Bromide of potassium is a powerful depressant of the nerve centres and of the heart and perhaps of the skeletal muscles as well. It overcomes reflex spasms, lowers blood pressure and sedates the motor tract of the cord and acts strongly on the skeletal muscles as well as on the heart. The potassium is the active agent on the muscles while the bromine sedates the nervous elements.

Bromide of sodium is a powerful sedator of the centres, abolishing reflex excitability and leaves the heart and respiration unaffected save through sedation of the centres governing these parts. The ammoniun salt is well adapted to the treatment of diseases attended with low blood pressure, weak heart and a highly excited state of the centres. In this way it controls spasms, pain and induces sleep in typhoid fever and pneumonia when there are weak heart and impaired respiratory energy.

ORGANIZED TO REPEAL THE ODIOUS MEDICAL LAW OF IOWA. —A large and respectable body of physicians in Iowa, irrespective of schools, have organized themselves into a compact to fight

the Iowa medical law in the courts of that State, and, if need be, to carry their case into the Federal courts. The law is a notorious piece of the trades union legislation. It was got through the Iowa legislature by chicanery, perfidy and broken pledges. Every good lawyer in the State, we learn, pronounces it unconstitutional.

RHUS AROMATICA, says Dr. J. T. McClanahan, is the remedy for all forms of fluxes of mucous membranes accompanied by relaxation. Hematuria, hemorrhage of the lungs, uterus, etc., are all well treated by it. It will relieve nine cases of ten of diabetis insipidus, and Prof. Goss says it is one of our best remedies for diabetis mellitus. We find it the best medicament we can use for nocturnal incontinance of urine in children and the prostatitis and cystitis of old men. It is of prime importance to have a pure and well made article of the fluid extract or concentrated tincture. Either of the great firms whose advertisements are found in this journal may be trusted for a reliable article. Durham says he finds it a most valuable remedy in uterine leucorrhœa and in the second stage of gonorrhœa; stick a pin here. Goss says it is to be trusted in chronic bronchitis attended with profuse expectoration. We have found it valuable in the summer diarrhœas of children after the active stage has passed off. In the second stage of cholera infantum this medicament is of decided value to check the diarrhœa and tone the mucous membrane. Goss says it acts on the kidneys as a soother and resembles somewhat in its action on the organs that of buchu. It is a valuable medicament to cure the backache of women, probably it is a uterine tonic.

PASTEUR AND KOTCH.

The French people are proud of their Pasteur and leave no stone unturned to make his name honored and revered among the nations of the earth.

Pasteur is a great man and the world accords him honor and recognizes the great benefits he has conferred on mankind. But Germany could not rest until the Germans raised up a rival to the great Pasteur, so the German people found Kotch a great God-send in the midst of a hurricane. Kotch is the rival of Pasteur. No, that's not the way to put it—let's see—yes, Germany is now the rival of France in the germ befunglement. In

our opinion, the whole scope of the present controversy regarding germs and the role they play in the world of disease is really a national struggle for supremacy in the world of thought between France and Germany. Kotch has accomplished but little of practical import. Pastuer has already accomplished a great deal of practical good; however, we are quite inclined to the opinion that he has got himself upon boggy and treacherous ground when he embarked in the hydrophobia enterprise.

CURE FOR CONSUMPTION.

Dr. Thos. J. Buchan, of Eastman, Dodge county, Ga., says there is a sure cure for consumption that he knows of, and simple enough be it, which is simply to live in the piny woods of lower Georgia and sleep in the open air in a hammock swung under pine trees. The trick is in sleeping out of doors with nothing but pine tops over your head and mother earth under you. We used to note years ago how people in the woods of Michigan kept healthy and hearty while they lived in log houses. However, those who were prosperous and got ahead in this world's goods, built fine tight frame houses, put up stoves and did away with the old fashion fire-places, slept in small tight rooms, houses kept warm and comfortable, pretty soon came loss of the pristine ruggedness of body and vigor of health, the women and children became puny and the doctor made unusually numerous calls. The children sickened severely, some died, others got over their illness but with feeble constitutions. The whole of these ills were caused by tight houses, illy ventilated especially in the sleeping apartments.

We say to you all, be sure to sleep in well ventilated rooms, and when you get out of sorts go and take up your bed and board in the piny woods for a season.

BORIC ACID

Is an antiseptic of rather remarkable properties though not the strongest in its germicidal properties. It certainly destroys many of the infectious germs that affect wounds and is most particularly powerful on the skin and the mucous membranes as a germicide. Beside this property, boric acid has a very powerful influence on the circulation in the skin and mucous membranes. Recently we applid some pulverized borax which was in impalpable powder to the conjunction of an infant, the case

being one of purulent ophthalmia with a very highly congested state of the mucous membrane which latter was secreting immense quantities of acrid irritating pus. After well cleansing out the eye with a syringe and rather warm water we applied boldly the dry powder to the ball. The pain was trifling as the child made no greater outcry than when the eye was being washed out, nor did it show evidences of pain in a few minutes after the application. The following morning we found the eye much improved in appearance, the red tortuous vessels and the puffy mucous membrane were considerably altered so that the vessels were very much reduced in size and had lost their varicose knottiness, and the mucous membrane was much paler while the pus was reduced in quantity and much thinner. We found the hyperæmia of the mucous membrane much reduced after each application, so much so, that after a week's treatment (by blowing the powdered boric acid on the ball once a day) the eye was about well.

Recently we applied boric acid to a very inflamed ulcer on the leg, the surrounding skin being shiny and somewhat crowded with inflammatory products. The result was, in 24 hours a considerable diminution of the swelling and redness. After a few days we found the ulcer healing kindly. In point of fact the boric acid exercised a powerful constricting influence on the vescular elements of the tissues.

Boric acid is a certain medicament in the diarrhœa of typhoid fever as we made mention of in these pages a few years ago.

BEEF EXTRACT.

We have frequently called attention to the value of peptonizing beef for feeding the sick. Recently we had a severe case of low fever to deal with, for all the symptoms showed almost certain death was near at hand. In this juncture we ordered some lean steak to be minced fine; a pound of the mince was treated with a pint of cold water and set aside in a warm place and stirred every few minutes. We added to eight ounces of water five drops of acid muriatic, 80 grains of good pepsin, this was then added to the minced beef in the other vessel and well stirred to mix both solutions thoroughly, then this vessel was placed in another vessel of water and kept at a temperature as near as we could judge of 90 to 100° F., stirring every ten minutes. In four hours we had a splendid solution of peptone which was fed

to the patient in teaspoonful doses every fifteen minutes. A great part of the remaining beef was still unreduced to peptone, therefore we added 10 fl. ounces more of warm water acidulated slightly with acid muriatic (3 to 5 drops) and kept the contents of this vessel at the same heat. After a few hours more peptone in solution can be removed from the vessel containing the minced beef, and more acidulated water added as already stated. Managing the manipulation in this way a large quantity of peptonized beef extract can be obtained from one pound of minced beef.

In making beef extract with pepsin it is well to bear in mind that after the fluid becomes saturated up to a certain point the power of the pepsin to continue the process of hydration and solution of the proteid is considerably crippled, simply because saturation prevents further solution. If at this point some of the saturated fluid holding peptone be withdrawn and more acidulated water added, then the pepsin again becomes powerfully operative until approaching saturation is reached, then the peptonizing powers of the ferment wanes and weakens. We have frequently spoken of this mode of peptonizing beef for making food to feed the sick.

This plan can be readily followed by any physician if he procures a good quality of pepsin and has the tact to manage the process with some skill and intelligence. Peptonized milk can be made in the same way as we have frequently shown.

THE MANUFACTURE OF ARTIFICIAL FOOD FOR INFANTS

Has become an extensive industry in this country and Europe, but we cannot say these kinds of enterprises contribute any valuable advantage either to the infants for whose special benefit they are prepared or to the public at large. Many of them are prime humbugs while others are decidedly overrated by their manufacturer and certain easily impressible professors whose glittering certificates of good character garnish the advertisements of the stuff. Last summer we heard of a kind of a foundling hospital in some eastern city where the unfortunates were cared for, and, as a matter of course, artificial food in large quantities had to be used to wholly or in part sustain the little ones. This institution, as we learn, was very generous and liberally supplied by the various manufacturers of artificial baby

food. We mean that the food was artificial, not the babies. Well, as the facts in the case plainly showed, none of these artificial foods were of much account so far as supplying a safe and sure substitute for mother's milk is concerned. Some of them were really rascally trash, while others, though better, fell far short of what was expected of them. We have known of many infants in this city to succumb under one or other of these artificial foods exclusively. We cannot view them in any other light than mere make-shift helps to supplement a deficient supply of mother's milk, and even then they are not as good as the preparation formulated by Dr. Arthur V. Meigs in his interesting and useful little book "Milk Analysis and Infant Feeding," published by P. Blakiston, Son & Co., 1012 Walnut street, Philadelphia, Pa., 1885.

Dr. Meigs' formula is as follows: Fresh sweet cream, 2 tablespoonfuls; milk, 1 tablespoonful; lime water, 2 tablespoonfuls; sugar water, 3 tablespoonfuls. NOTE—The sugar water is prepared by dissolving 17½ drachms of sugar of milk in one pint of water; this sugar water is liable to sour in warm weather, therefore considerable care must be given so that it is not used when in a state of fermentation or acidity, only the freshest pure solution must be used, and it must be kept in a cool place and prepared every day fresh. The ingredients should be kept separate and mixed only as required to feed the infant. The milk, cream and sugar water must be fresh every day, the lime water is easily prepared by adding a lump of recently burnt lime the size of a hen's egg to about 3 or 4 pints of soft water, let stand, shake occasionally for a day or two, then use the clear water, which is lime water. The proportions given in the formula constitute the strength of food for infants under 6 or 8 months old; as months advance make it stronger by increasing the milk or cream. The daily allowance for a vigorous infant the first six months may be a quart or more.

Another excellent infant food is prepared after a modified formula of Liebeg's infant food, as follows: Place a tablespoonful of good wheat flour in a bread pan, then put the pan in a moderately hot oven to *brown*, the slower it browns the better, then mix it with two or three tablespoonfuls of cold water, stir it up well and have it free of lumps; to this add 4 fluid ounces of new milk, stir well then put the whole in a proper vessel and slowly bring it to a boil over a stove or glowing coals and con-

tinue to boil for ten minutes, stirring all the while to prevent scorching, then remove from the fire, and when cool enough to take as food add a teaspoonful or two of good extract of malt, stir well and it is fit for feeding. In this form the starch is converted by the heat of the oven and the diastase of the malt into maltose and glucose, which are digestible forms of sugar exactly in the condition to be acted on by the liver and converted into glycogen or liver sugar, after which it is slowly dissolved out of the liver cells and enters the blood as glucose which is an important and essential form of carbo-hydrate food for the nourishment of the tissues. The malt extract not only acts on the starch but we are of the opinion it also acts on the casein of the milk and the gluten of the flour in some way that loosens the bonds of their molecular and thus enables them to be more completely converted into peptons by the natural ferments of the gastric and pancreatic juices; certain it is that cow's milk treated with pure diastase will not coagulate into hard, tough curds, but its coagular are often more flaky and easier broken up. This is a pretty near approach to mother's milk, and as we told our class two years ago when lecturing on food, that malted paps made with milk and lightly sweetened with sugar of milk constitute the very best food we can prepare for sick adults or for the nourishment and raising of infants by hand.

FATS

Are hydrocarbons of great energy, their combustion produces immense heat and light. They require far more O to combust them than proteids, starch or sugar, hence they demand a large supply of O.

During starvation the fats are the first to suffer loss, save a small amount of floating proteids that are running in the blood and lymph paths which are as a matter of course first taken by the combusting energies of the organism, then the fats are seized on.

(1.) A starving animal in good condition will last longer than one in poor condition.

(2.) If an animal is fed no other food save an insufficient quantity of proteid food free from fat, sugar and starch, such an animal will die nearly as soon, and we believe sooner, than if it has no food at all.

(3.) On the other hand, an animal supplied with a small

moiety of fat daily and with water, will live much longer than No. 2, such an animal will eleminate more C O_2 and less urea than No. 2 and live longer.

(4.) Fats sustain the organic functions by supplying energy of a potential kind. O will oxidise fat more steadily than it will sugar, and the energy obtained from fat is lasting and of a steady nature.

(5.) One hundred parts of fat equal 175 or 185 parts of starch, weight for weight for combustion in the economy.

(6.) Fat equalizes the combustion of proteids and lessens their oxidation in the economy.

(7.) Fats permit a very low minimum of proteid to be taken in the food without material injury to the economy.

(8.) It is not proved that starch and sugar can be converted into fat in the economy although this may be probable yet not certain.

(9.) Fats are found in all the fluids and solids of the animal body.

(10.) Starch or sugar will not supplement fats when a minimum quantity of proteids are ingested for as long a time as fats will.

(11.) With the assistance of fat the quantity of urea is diminished and the quantity of C O_2 increased, hence diminished oxidation of the proteids of the body.

(12.) Fat promotes the metabolism of the proteids in a degree demanded by the physiological processes of life.

(13.) Fats promote the destruction of proteids and the formation of new fat in the economy. So it is, a cow will make more butter than can be furnished by the fat in her food; evidently the butter mainly comes from disrupted proteids, but she must have fat to promote the metabolism.

(14.) Fat is a powerful constructor and builder, deserving to be used in the shape of cod liver oil in the treatment of chronic wasting diseases.

PEPSIN.—We received a package of pepsin from Messrs. Parke, Davis & Co. in compliance to a card we wrote them for some of this valuable therapeutic agent.

We gave Prof. Goss a part of the contents of the bottle. Now, both Prof. G. and myself unite in pronouncing this concentrated pepsin as good as we could wish. It is quick and active and

gives the very best satisfaction. There is no discount on this. This pepsin has all the evidences of purity. We tried a grain or two dissolved in very slightly acidulated water to which chopped white of egg was added and the vessel set aside in a warm place; in four hours nearly the whole of the proteid was broken down and dissolved, save a few shreds in the solution.

BOOK NOTICES.

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Send to Lambert & Co. for a copy of the book. See their advertisement in this journal.

The Human Body, an Account of its Structure and Activities and the Conditions of its Healthy Working, by H. Newell Martin, D. Sc., M. A., M. D., Prof. of Biology in Johns-Hopkins University, etc., third edition, New York, Henry Holt & Co. This is one of the volumes of the "American Science Series" that is being published by Messrs. Holt & Co. Though an elementary work on physiology it is certainly the best of its kind. After examining the book, we have no hesitation in pronouncing it a most valuable text-book, that even physicians may read with

profit. It is finely adapted to the comprehension of first course medical students, inasmuch as the author makes every point in structure and function, as clear and comprehensible as it is possible for a book to do. It is planned somewhat after Foster and Huxley, the two greatest English writers on physiology, which is, in our opinion, a mark of great merit in the book. Hygiene is briefly but judiciously treated on.

The Physician's Visiting List, (for table of contents and special arrangement of the book see page 360, November number of Journal), is the very thing every physician is in need of. We have used one every year for seven years and cannot do without it. It is well and conveniently arranged, good paper and solid binding, never comes apart and stands hard usage, we make it an account-book, ledger, cash-book, memorandum, etc. Send $1.00 to P. Blakiston, Son & Co., 1012 Walnut street, Philadelphia, Pa., for a copy; also ask for a price and descriptive catalogue of their publications.

An epitome of the newer materia medica standard medical products, and fine pharmacutical specialties, introduced and manufactured by Parke, Davis & Co., to which is added a complete property and dose list of all the fluid, solid and powdered extracts, German tinctures, normal liquids and concentrations prepared by them, together with a complete formula list of their sugar and gelatin coated pills, designed for the special convenience of the busy physician, fourth edition, revised and enlarged, 1886.

This is a well prepared book of 76 pages, containing a large fund of valuable therapeutic and practical information. Write to the publishers for a copy which will be sent you free of charge if you mention this journal.

History of the English Language, by T. R. Lounsbury, Prof. of English in the Sheffield Scientific School of Yale College, New York, Henry Holt & Co., 1886. To the courtesy of the publishers we are indebted for a copy of this little treasure, for such it is, in a sense of conveying a history of the rise, progress and development of our language, and the varied influences that have in one way and another brought the language up to its present state of perfection. We commend the book to our readers.

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The Morphine Habit, (Morphinomania), by Prof. B. Ball, M. D., of the Paris Faculty of Medicine. Price 15 cents; published by G. J. Fitzgerald, 106 Chambers st., New York. Humboldt Library.

This is an interesting book containing a large fund of information on the nature and treatment of the morphine habit. An absorbing chapter is devoted to discussing "the border land of insanity," also one on central dualism and insanity in twins.

Death-rate of Practicing Physicians in Great Britain is, according to the reports of the Register General, compared with that of persons of other occupations—thus: clergymen, 15.93; schoolteachers, 19.90; lawyers, 20.22; all other occupations, 22.83; physicians 25.53. The above figures give the rate per 1000 of persons in each class of the community.

Yro's Philosophy—second American edition, from the revised and improved London edition. We heartily recommend this book, so highly do we esteem it. Published by the same house. Cloth $3.00, sheep $3.50.

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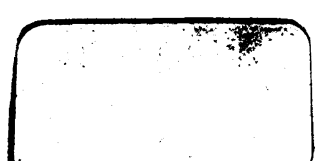
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